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Chironian Fall/Winter 2006

New York Medical College

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INSIDE

Chironian
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Rev. Msgr. Harry C. Barrett Ends His 14-Year Tenure as President

Rev. Msgr. Harry C. Barrett, D.Min., M.P.H., announced in September that he is stepping down as president and chief executive officer of New York Medical College. He assumed his new role as pastor of Sacred Heart Parish in Monroe, N.Y. on October 1. At a September 27 meeting of the Board of Trustees, board chairman Ronald F. Poe expressed regret over Msgr. Barrett's departure and appreciation for his years of leadership.

"It has been a privilege to serve New York Medical College alongside a committed leader like Msgr. Barrett, and we wish him well in his new position," said Mr. Poe. "I have no doubt that the entire College community will work together to make this a dynamic transition to a new chapter in the life of this great university."

He went on, "New York Medical College is a New York State member corporation, whose members have the responsibility of appointing the president, trustees, chairman of the board, and provost. At their September meeting the members appointed Ralph A. O'Connell, M.D., provost and dean of the School of Medicine, acting president effective October 1. The members also requested that Karl P. Adler, M.D., who is the Archbishop's Delegate for Health Care and who served as dean of the School of Medicine from 1987 to 1994, work with Dr. O'Connell to formulate a plan for the future leadership and administration of New York Medical College. They will request input from the Board of Trustees' Strategic Planning Task Force, which consists of representatives of the trustees, alumni, faculty, affiliates and administration, and will report back to the members with their recommendations."

Msgr. Barrett has served as the College's chief executive since 1992. From the beginning, he engineered a restructuring of the university aimed at raising its profile as a health sciences university in the Catholic tradition. Within a few years of taking office, he spearheaded and implemented a university-wide strategic plan that resulted in significant improvements to buildings and grounds, a doubling of research funding, and steady increases in student performance on every scale of quality measurement. A few years into his presidency, he led an effort to position the College as a prime resource for biotechnology and economic development in the Hudson Valley and New York metropolitan area, establishing a Technology Development Division that would foster collaboration between university scientists and biotechnology companies.

Among the highlights of his tenure were full accreditation of the College by the Middle States Commission on Higher Education as a health sciences university comprising three schools, and continuous accreditation of the School of Medicine by the Liaison Committee on Medical Education. Under Msgr. Barrett's leadership, construction of a four-story, 56,000-square foot medical education building was completed in 2001, distinguished by a state-of-the-art anatomy laboratory and the development of 18,000 square feet of new research space. In 2003 the School of Public Health received initial accreditation from the Council on Education for Public Health.

A graduate of St. Joseph's Seminary, Msgr. Barrett received an M.S. Ed. in counseling from St. John's University and was awarded a master of divinity from St. Joseph's Seminary. He received an M.P.H. from Columbia University and was awarded a doctorate in ministry from the New York Theological Seminary. He is a member of the American Public Health Association, the New York Biotechnology Association and the executive committee of the Westchester County Association; a fellow of the New York Academy of Medicine and a member of its admissions committee; a trustee of the Commission on Independent Colleges and Universities; and he has served on boards and committees of the Greater New York Hospital Association, the Catholic Health Association and countless hospitals, institutes and nonprofit organizations.

At his inauguration on December 2, 1992, Msgr. Barrett concluded his address with these words: "As the president of New York Medical College, I commit myself and the university to a constant concern for ultimate questions of faith and science; to a concern for the spiritual development of faculty and students; and to ongoing reflection on questions of ethics as a daily activity of the university. These responsibilities will require the deepest level of commitment from every member of the university family. I commit my life to you and ask the same from each of you. If you experience any anxiety from what you have heard, remember the words of St. John: 'Fear is driven out by perfect love.' Let the new moment for New York Medical College begin." There are many who believe that, during his years as chief executive, Msgr. Barrett made good on that promise, and that his words—timeless, and almost prophetic—serve as a reassuring message today.

—Donna E. Moriarty, M.P.H. '04

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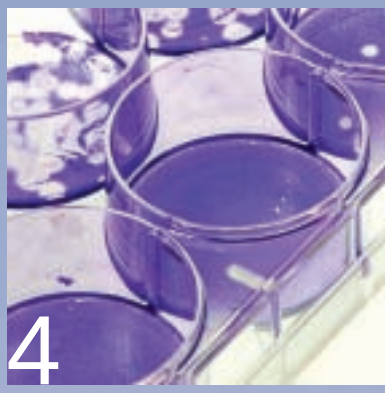


Alumni

Alumni News

On the Cover:

Francis L. Belloni, Ph.D., dubbed "a Renaissance man" by colleagues, is a physiologist, educator, humorist, chef and friend to ferrets. As dean, he guides the Graduate School of Basic Medical Sciences with a light touch.

An enterprising group of medical students overcame numerous obstacles, using creativity, persistence and outright nagging for the chance to run an inner-city clinic. Medical students like Andrew Chang, Class of 2008, team with at least one attending physician like Pranav Mehta, M.D., assistant professor of clinical medicine, to conduct patient histories, physical exams, diagnoses and treatment plans.

Which came first—the flu virus or the egg? The laboratory of Doris J. Bucher, Ph.D., sets the standard for the formulation of each year's flu vaccine, which is grown in eggs.

THE WORLD FIGHTS THE FLU WITH DORIS BUCHER'S VACCINE

Her microbiology lab takes strains sent by the CDC and makes them grow. The reassortments are sent to the pharmaceutical companies that manufacture the vaccine.

Tissue culture plates, stained with crystal violet, are the growing medium for cell monolayers. A preparation of influenza virus is diluted and applied to the cell monolayer with an agarose overlay. Soon circular plaques, or holes, appear in the cell monolayer and are visualized by staining, with each "hole" representing one original virus particle.

By Marjorie Roberts

New York Medical College has gained considerable fame for research on cardiovascular disease and Lyme disease, but there is a third long-time endeavor that has not had its share of the stellar reputation pie. Perhaps the pedestrian nature of influenza has diminished the public's interest despite the fact that every year, 36,000 people die from the flu in the U.S. alone and 100,000 to 200,000 are hospitalized. And though the flu shot is the best protection money can buy (Medicare participants get it for free), millions fail to be vaccinated. The reasons are not complicated. There are those who think they don't need it. Others hate getting injections for any reason, and there is a subset who believe they will contract the flu from the injection, despite the assertion of researchers that the virus is inactivated

ABOVE: Doris J. Bucher, Ph.D., inherited an important legacy from her mentor and former boss, Edwin D. Kilbourne, M.D.—the means to develop high yield reassortants for production of the annual flu vaccine. Few people know that she, in effect, recruited Dr. Kilbourne to New York Medical College from the Mount Sinai School of Medicine, where they first began their long professional association.

in the process of making the vaccine and cannot cause the disease. One thing is certain—the flu shot must be had every year because the vaccine is altered to reflect the important mutations the virus makes. This is where New York Medical College comes in, thanks to the microbiologist who earned the job and continues to formulate the influenza vaccine used in the U.S. and abroad.

Respect the flu

Nothing gives the flu its due better than this oft-quoted statement: More people died in the influenza pandemic of 1918-1919 in the U.S.—500,000—than in battling all the wars of the twentieth century (World Wars I and II, the Korean War and the Vietnam War)—423,000.

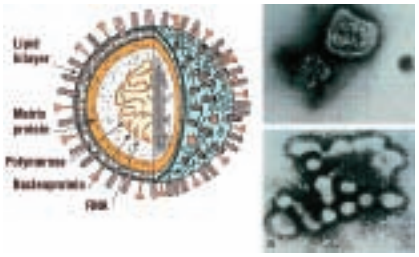
"It was 1969 and I had just finished my post-doc in physiology. I was the sickest I've ever been in my life from the flu," says Doris J. Bucher, Ph.D., associate professor of microbiology and immunology. "Shortly after that time, I was offered an opportunity to work on flu. From first hand experience, I knew that the flu was pretty important."

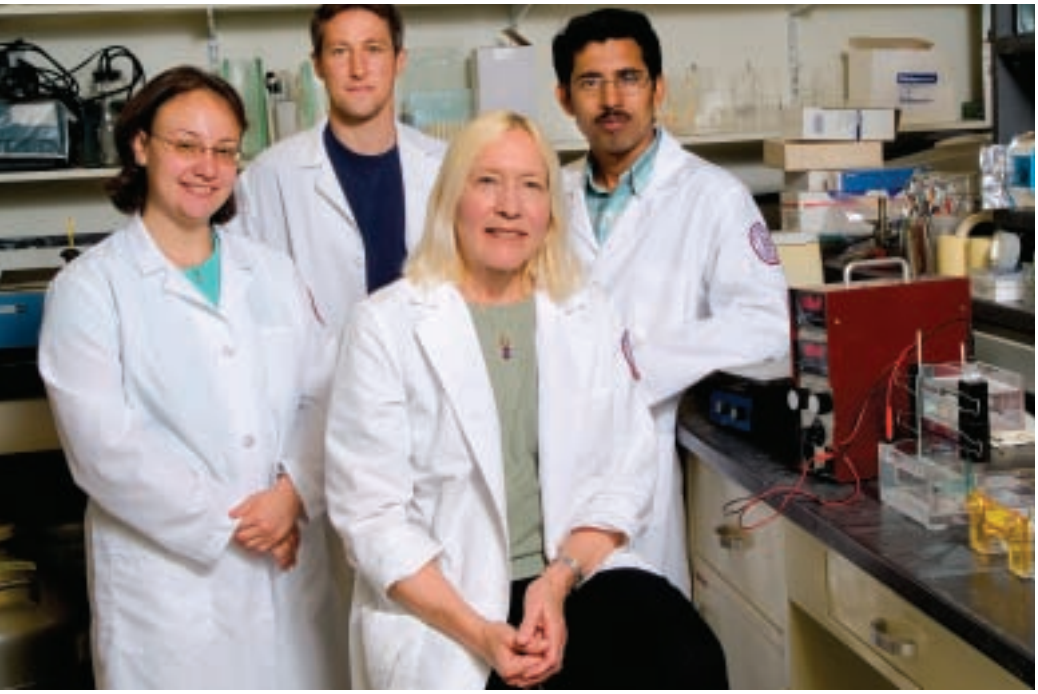
Dr. Bucher has become pretty important herself to the production of the flu vaccine at its earliest stage of development.

Classifying herself as a "protein chemist," Dr. Bucher laid the groundwork of her future with influenza by taking a position with Edwin D. Kilbourne, M.D., who founded the department of microbiology at the Mount Sinai School of Medicine in New York City. "I had two other offers," she recalls, "but Kilbourne's work seemed to be the most important. He was interested in my protein expertise in developing a vaccine consisting of purified proteins." In 1987 Dr. Bucher accepted an invitation to join the Department of Microbiology and Immunology at New York Medical College; five years later Dr. Bucher persuaded her Mount Sinai mentor to join her at the college. "Dr. Kilbourne has received much recognition for his many contributions to influenza research and influenza vaccines including membership in the National Academy of Sciences," Dr. Bucher points out. One of the major contributions from Dr. Kilbourne was his development of high yield reassortants (type A) for the annual flu vaccine that allowed production of influenza vaccines in sufficient quantities for the world supply. Dr. Kilbourne retired in 2002 and is now emeritus professor at the College.

Several years prior to Dr. Kilbourne's retirement, Dr. Bucher decided to extend the high yield reassortment system to type B influenza viruses. The

BELOW: At left is a diagram of the structure of the influenza virus. At right are electron micrograph images of influenza virus particles. The influenza vaccine must be reformulated on an annual basis due to changes in the surface antigens, hemagglutinin and neuraminidase (see diagram).





The team in Dr. Bucher's lab in the Department of Microbiology and Immunology draws some of its brainpower from the Graduate School of Basic Medical Sciences. Jeanmarie Silverman, left, is a graduate student in the Master's program, and Alex Fulvini, center, is a Ph.D. candidate. Manoj Kumar, D.V.M., Ph.D., right, is a postdoctoral fellow. In some years the team will work with as many as a half-dozen target strains to single out the reassortant du jour.

influenza vaccine manufacturers were very interested. Working with Edward Orff, Ph.D., a post-doctoral candidate at the time, and Jianhua Le, Ph.D., research assistant professor, she successfully produced high yield B reassortant viruses suitable for use in the flu vaccine by improving the antibody selection process. For the past 30 years, many laboratories around the world had been trying to produce high yield B reassortants without success.

Following Dr. Kilbourne's retirement, Dr. Bucher was fortunate in another development. Barbara Pokorny, Dr. Kilbourne's laboratory supervisor, wasn't ready to retire and joined Dr. Bucher's laboratory. Pokorny had worked on all of the influenza vaccine reassortants since the famous X-31 vaccine strain for the 1968 Hong Kong flu. Along with Dr. Le and Alex Fulvini, a Ph.D. candidate, Pokorny brought her wealth of expertise and experience to developing the recent H3N2's strains, including NYMC X-147 in 2004-2005, NYMC X-157 in 2005-2006 and NYMC X-161B in 2006-2007. These strains were used in most of the three hundred million vaccine doses produced worldwide.

Unlikely background

Dr. Bucher's upbringing is somewhat unusual: "I'm Pennsylvania Dutch. I grew up on a Pennsylvania dairy farm in Lebanon County. The farm has been in my family since my great-great grand-uncle bought it in the 1800s. My ancestors were German-speaking people who came to this part of Pennsylvania in the early 1700s," she clarifies, "not Amish. My parents encouraged me to go to college. As a good farm girl, I started in nutrition at the School of Home Economics at Penn State and found a wonderful mentor, Dr. Ruth Pike. She suggested I study at UC Berkeley. My Ph.D. in biochemistry came from Berkeley—biochem was hot! At Berkeley, I was extremely fortunate to do my research with another outstanding professor/ mentor, Dr. W. Duane Brown. The physiology post-doc of my influenza experience was at UCLA."

Dr. Bucher has been teaching medical students medical virology and medical microbiology for many years, 14 of them as course director at New York Medical College. There was a time when scientists believed infectious diseases would be wiped out by the year of the millennium. Instead, new viruses have been emerging in the animal reservoir that are efficient at moving to human hosts; at the same time antibiotics have stopped working on their bacterial brothers. Worse yet, other influenzas are complicating the picture. Between December 26, 2003, and last spring, the new version of Avian flu has killed 134 people worldwide as it continues to ravage Asian poultry stocks. Though Avian flu is still difficult for humans to catch as it requires heavy exposure, Avian flu (H5N1) is under scrutiny by the CDC lest it mutate into a form that spreads easily around the globe from person to person in another pandemic.

Dr. Bucher admits she prefers to concentrate on the ordinary flu. "We have our hands full with the annual flu. I find it exciting because it's always changing," she says, "and the change is always challenging." Production of the high growth strains begins with injection of two viruses into the same egg, the current strain and a second strain that was isolated in 1934 and grows extremely well in eggs. The process of producing the high growth vaccine strains involves shuffling of the gene pieces and is called reassortment; the products are reassortants. The vaccine is composed of two "A" components and one "B" component; the B is not changed as frequently but it was changed this year (2006-2007).

"In some years we work with a half-dozen target strains," she continues. "Some are dead ends while others run strong. The two A components are H1N1, which has not been changed for several years, and H3N2, which causes a more severe illness, has been changed three years in a row since 2004. The genes of the virus mutate very easily, and the vaccine must produce antibodies against the hemagglutinin [major surface antigen] and the neuraminidase [minor surface antigen]." They cover the flu virus in the form of

protein spikes, and with change, they result in a new strain of flu. Hemagglutinin allows the virus to attach to host cells; neuraminidase helps the virus leave the host cell after the virus completes its replicative cycle and moves to the next cell. Based on intense monitoring of thousands of flu isolates at the Influenza Branch of the CDC, a decision is made on the composition of the flu vaccine every year. The goal is to make sure the vaccine matches the currently circulating strains as closely as possible. Actual production begins with growing the virus in millions of eggs. The virus is purified and killed, then formulated into the vaccine that, when injected, stimulates antibodies to the virus. A major concern is that in the six months it takes to produce the vaccine, the flu virus may have evolved into a strain that the vaccine cannot block.

Small world

The 2005-2006 flu vaccine had special meaning in Westchester as the strain that put New York Medical College and Valhalla, N.Y., on the influenza map. Strains of infection or disease are named for the places they were first isolated, e.g., Hong Kong, Shanghai and China's Fujian province. So when the CDC sent Dr. Bucher a new flu strain marked New York/55, she wondered where it had been found. "The sample we were sent was similar to a California-like strain already identified in patients in California, North Dakota, Wisconsin and Washington. It turned out that samples of the California-like virus were difficult to grow—until two samples of New York strains arrived from the CDC.

In her microbiology lab, Dr. Bucher and research assistant professor Jianhua Le, Ph.D., observe as Barbara Pokorny, laboratory supervisor, meticulously injects each egg with two viruses: the current strain and a second, older strain that grows well in eggs.

"It takes a New York virus to make a good vaccine," smiles Dr. Bucher. She had found out that the New York sample had been isolated by Syed H. Abid, Ph.D., chief of microbiological services at Westchester County's Department of Laboratory and Research and adjunct assistant professor of microbiology and immunology at the College. "His laboratory is on one side of the parking lot and mine is on the other side," she says of the campus in Valhalla that is shared by the County of Westchester and New York Medical College. In fact, that year there were probably 30,000 influenza isolates made in the U.S.—long odds for the sample coming from Dr. Abid's lab.

Her sensitive position in the flu vaccine industry means Dr. Bucher stays above the fray when something goes awry. When Chiron, then the largest manufacturer of the vaccine, was shut down due to contamination in its London plant, she avoided discussing the situation from her expert viewpoint. Nor did she criticize when the vaccine was late in arriving last year in time to begin inoculating patients at clinics and doctors' offices around the nation. She prefers to champion the CDC recommendations as to who should get a flu shot:

- Children ages six months to 23 months.
- People 65 years of age and older.
- Anyone over the age of 2 who has an underlying long-term illness or a weakened immune system.
- Women who are or expect to become pregnant this flu season.
- Residents of nursing homes or other chronic-care facilities.
- People who are six months to 18 years of age and take aspirin daily.
- Healthcare workers who provide hands-on care to patients.
- People who have or take care of a baby under six months old. Babies under six months old should not be vaccinated.

And as a parting shot Dr. Bucher advises, "Who should get a flu shot? Anyone who doesn't want to get the flu!"

There was a time when scientists believed infectious diseases would be wiped out by the year of the millennium. Instead, new viruses have been emerging in the animal reservoir that are efficient at moving to human hosts.

PHYSIOLOGIST DEAN RULES BASIC SCIENCES with a light and caring touch

When the spirit moves him—and it surely does—Frank Belloni uses his sense of humor in dealing with students and fellow members of the faculty.

By Barbara Burgower Hordern

If the ability to explain scientists' needs to higher-ups was all that was needed to be a great dean, Francis L. Belloni, Ph.D., would have been the ideal choice when he was appointed acting dean of the Graduate School of Basic Medical Sciences at New York Medical College. If all it took were the ability to inspire students and faculty or to mediate, teach or lead, he would still have been in the running. But the College hit the jackpot when the administration chose Frank Belloni, as acting dean, and two years later made it permanent in 1993. He is a man who repeatedly demonstrates all these abilities, not to mention vision and the patience to forge the consensus needed to effect change in a way that is attracting high quality students to his small universe in Valhalla.

"Frank is probably one of the few remaining Renaissance men," says Edward J. Messina, Ph.D., professor of physiology. "He can wear many hats because he's an expert in many things. He has diverse interests and doesn't limit himself. He's very clever, a very witty, erudite person who is often way ahead of his colleagues in seeing through complex issues."

He's also known for his caring attitude that has made him a favorite of students, faculty and administrators. "I really don't think he's mean enough to be a dean," says Victor A. Fried, Ph.D., with a straight face, a professor of cell biology and anatomy.

Coming home

Joining the faculty in 1981 was a true homecoming for Dr. Belloni, who grew up in Yonkers, N.Y., just 10 miles from Valhalla. He earned a scholarship to Regis High School in Manhattan and commuted daily by bus and subway. A National Institutes of Health (NIH) Honors Trainee, he earned academic scholarships to Providence College in Rhode Island, where he received a B.S. degree in honors biology in 1970. His next stop was the University of Michigan where he studied the cardiovascular system. After receiving his Ph.D. in physiology in 1975, he stayed in Ann Arbor for three more years as an NIH-funded postdoctoral scholar.

Dr. Belloni joined the research faculty at the University of Virginia, where he received additional training before coming to New York Medical College as an assistant professor. He was promoted to associate professor of physiology in 1986, and granted tenure two years later. It wasn't long before he won a reputation as a gifted teacher.

H. Thomas Lee, M.D. '94, Ph.D.'94, studied under Dr. Belloni for six years. Now an assistant professor of anesthesiology at Columbia University, Dr. Lee says, "Dr. Belloni is the best scientist I ever met. It took me a long time to pick a mentor, but after I took his physiology course I was hooked. He let me make mistakes and helped me learn from them rather than making the same mistake twice. And he taught me the best thing you could learn as a student: For every experiment you do, what is the hypothesis? It sounds simple, but not many people *do* do it, and it's a recipe for failure if you don't."

> "He's very down to earth. You don't feel that you're dealing with some high and mighty powerful person when you talk to him. Dean Belloni's door is always open."
>
> — Nicolas Kummer, M.D./Ph.D. candidate

Dr. Lee believes the same skills that made Dr. Belloni a great teacher make him a great dean: "He is calm and patient and he is a good moderator. He doesn't take sides, even if he sometimes wants to."

Crossing the border

"I normally dislike bureaucrats strongly," says Dr. Fried, "But this guy has a deep passion for understanding things and doing things right. He's really thoughtful and smart in a humanistic way. He is a really good guy who sometimes gets caught on the border—like between Iraq and Iran."

The straddling of sometimes-tense borders is all part of being a dean. One of Dr. Belloni's first challenges was helping to convince the upper echelons to appreciate both the values and needs of the graduate school, which wasn't as highly regarded within the College as it is today.

He knew from experience that faculty seldom have a broad understanding of administrative issues such as budgeting, financing and the role of the university's hospital affiliates. Part of the dean's job is to ensure that his faculty understand these issues. "One of the most interesting things about academia is that everyone thinks rationally but only within their own frame of reference. When I first started as dean, I think there was a lot of distrust between the faculty and the administration. Msgr. Barrett [Rev. Msgr. Harry C. Barrett, D.Min., M.P.H., president and chief executive officer] has put a lot of energy into listening to and communicating with the entire College community, which has created a much more cooperative spirit. I view part of my role as helping everyone understand what the other is thinking. Communicating back and forth is a big part of making a university work," he says.

A horn moment

"Look up. This is a horn moment," Dr. Belloni often says in his classes as he honks his Harpo Marx-style horn to emphasize a point—really. He sees his role as a liaison, facilitating better communication not just between faculty and administration, but also between students and faculty.

"He's very down to earth," says Nicolas Kummer, an M.D./Ph.D. candidate working on a doctorate in microbiology and immunology. "You don't feel that you're dealing with some high and mighty powerful person when you talk to him. Dean Belloni's door is always open. You don't have to make an appointment. He's always busy, but he always takes time to look up and have a word."

"He's a little intimidating at first," says Kira Smith, a first-year medical student who completed her master's degree in physiology at the College. "Of all our faculty members, he really seems the most interested in getting to know you.

He walks up to you in the hall and asks you your name repeatedly until he remembers it."

Nora Ali, another first-year medical student, remembers she was terrified the first time she heard that Dean Belloni was looking for her. "I was working in the physiology lab while earning my master's degree. I was so scared. What could I have done? My heart was pounding. I went by his office and his assistant told me he was expecting me. The first thing he said was, 'You're not in trouble.' He knew I was from California and couldn't go home for Thanksgiving. He wanted to invite me to join him and his wife, Maggie, for Thanksgiving dinner. That's one of the things I really love about this school. The faculty and staff really look out for students and make us feel at home. And Dr. Belloni is unique, because he's really a good cook!" The dean's pumpkin ravioli gets rave reviews from students.

Dr. Belloni may be fond of turkey, but only as honored guests in his animal-friendly, vegetarian home.

Because Maggie, who rehabilitates wildlife and has a particular fondness for birds, will not eat "anything with a beak," pasta is the main course for Thanksgiving in the Belloni household. This doesn't stop him from prominently displaying toy stuffed turkeys. He is also known for rather wishfully giving one of Maggie's rescued Peking ducks the name L'Orange.

Students love his home, with its "ferretarium," devoted to rescued ferrets. A colorful mural in this room features ferrets walking over a rainbow bridge to a peaceful pet heaven, which prompted Belloni to rename the room the Sistine Ferretarium. Outside is a large wildlife cage that they built for Maggie's rehabilitating animals.

Broken lock

When asked about his accessibility, he quips, "That's because the lock on my door is broken. Actually, part of my job as I see it is to provide that access for the students. I like working with students, which is why I'm in this business. Like everyone else, I find there are times I don't want to be bothered. But we're trying to train a new generation of science professionals. Students may approach me with an idea they've had related to their work or for some new student activity, and want some encouragement and guidance in following up on it. At other times, they've got a problem on their mind. The training of students in graduate school is very much like a classic apprenticeship. Students work closely with their thesis advisors. Usually the relationship works very well, but sometimes problems arise, as in any relationship. When that happens, students often feel there is nothing they can do. I can provide an outlet for them. I can help them define the issue and see what their options are. The same thing holds for post-doctoral research fellows as well. Horace Davenport, my chairman when I was in graduate school myself, taught me that leadership involves providing a lot of support to those you are trying to lead. He used to budget 25 percent of his time just to listen to and help individual members of his faculty with whatever was worrying them at the time. I've tried to adopt the same approach to being dean, although I think Horace underestimated the time involved!

"Students and post-docs are in a vulnerable position as far as power is concerned. Sometimes they feel they can't approach the person they are working under without repercussions and need someone to advocate for them or just someone else to talk to. Often, I can help them understand their advisor's position or help them devise workable strategies to resolve their particular issues. If needed, I can mediate, but my preference is to help them learn how to work out their own problems. Our goal is to take these very enthusiastic young people and help them focus their energies on achieving their scientific and professional goals."

Helping students thrive

To that end, Dr. Belloni has been instrumental in starting two new programs in the Graduate School of Basic Medical Sciences. The most challenging has been the Integrated Ph.D. Program (IPP) for which the dean has advocated for years. Entering its second year, "it's now semi-integrated," he says. "We had six different programs, each one relatively small, with only one or two students entering in any given year. There are problems with that. The students didn't have a peer group to rely on, which is important in stressful endeavors like graduate school or medical school. It became very difficult to sustain six independent programs, all at a high quality, at the same time. Also, biomedical science is becoming more and more interdisciplinary. No one can be an expert in all areas, so scientists have to collaborate. To do that successfully, they need to have a common vocabulary so they can talk to each other."

A work in progress

Under the Integrated Ph.D. Program, students do not declare a major or select a preferred research mentor until their second year. During year one, they take a core curriculum that gives them that common vocabulary. First-year students also rotate through three different laboratories in different departments. There are still kinks to work out, but Dr. Belloni knew from the beginning this would be a work in progress.

Known as a dean with an open door, Frank Belloni memorizes the name of every student who traverses the halls of the Graduate School of Basic Medical Sciences.

"We're learning how to work together and advise the students as a group," he says. "The students are happier because they have each other to rely on when the going is tough, and we're letting them rotate throughout the whole school. We've already had students come to us planning to study in one field who have decided to go into another because they became excited by the opportunities they saw there. Since it is an apprenticeship, picking the right person to work with is extremely important. If we give the students more opportunity to make the right match, they should be better able to thrive."

The College is one of only ten in the nation to receive funding from the Council of Graduate Schools to develop ways to teach research ethics to the broader university research community.

The program is already showing signs of success. The number of applications is on the rise, as is the quality of the applicant pool. "Since we are admitting one group instead of six, we're able to choose the top ten out of a pool of 70 or 80. That allows us to be more selective. We're having more success with applicants accepting our offers, too."

Students are particularly enthusiastic about the Responsible Conduct of Research course co-taught by Dr. Belloni and Dr. Fried. The College is one of only ten in the nation to receive funding from the Council of Graduate Schools to develop ways to teach research ethics to the broader university research community. Drs. Belloni and Fried have also extended this effort to a series of sessions throughout the academic year on research ethics. These sessions are open to all students, postdocs and faculty. The course and the open sessions use role-playing and small group discussions to examine ethical dilemmas that research scientists often encounter. When can you discard aberrant data without biasing your conclusions? When you leave a lab, who owns your data, you or the principal investigator? Who is entitled to be listed as an author of a paper? When two labs collaborate, how is credit for the work allocated? Who gets to file a patent? Is it a conflict of interest to work on something you hold a patent on?

"We want students to learn how to approach problems," Dr. Belloni explains. "The rules and principles are pretty straightforward in isolation, but in a given real situation, there may be two or three principles in play. So which do you weigh more heavily? The lesson is that you don't wait until you write the paper to decide these things. The senior people need to discuss this with students ahead of time."

Says Nicolas Kummer, "Dr. Belloni is trying to make this a better place. He's doing good things, and he always does them in a nice way. When we had to meet for the ethics workshop early in the morning, he always had bagels and coffee for us."

And that's the sort of thing that most endears Frank Belloni to his many fans. "A characteristic that most people notice but don't give enough attention to," says Dr. Messina, "is his basic humanity. He will go out of his way to help anybody and everybody." In short, Dean Belloni is proof positive that nice guys needn't finish last. As Columbia's Dr. Lee says, "He's the best."

DISASTERS
Don't Discriminate

The Center for Disaster Medicine provides training and planning for the responders who help those most vulnerable to calamity.

By Bob Devol

Whether it's terrorism, hurricane, heat wave, fire or flood, all in their paths become victims. Most adults have remarkable capacities to cope with, or even avoid, many disasters. Others are not so fortunate.

- A four-year-old boy separates from his parents.
- A 94-year-old woman suffering from glaucoma and hypertension is bewildered.
- A mentally challenged man is unable to comprehend the dangers he faces.
- A family of six on public assistance lack the means to either drive or easily take public transportation away from danger.

Providing planning and training for fast, effective help to vulnerable populations like these during disasters is a main focus of the New York Medical College School of Public Health's Center for Disaster Medicine (CDM). Established in September 2005, the CDM specializes in many facets of a potential disaster, including preparedness for children, the elderly and those with special needs, plus preparedness issues unique to the Hudson Valley region of New York. The center also conducts interdisciplinary research, and provides specialized emergency preparedness training, technical assistance, plan development and education for the first responders to disasters, terrorism and public health emergencies.

In charge is David S. Markenson, M.D., associate professor of pediatrics in the School of Medicine and associate professor of public health practice in the School of Public Health. Dr. Markenson is also chief of pediatric emergency medicine at the Maria Fareri Children's Hospital at Westchester Medical Center and a nationally recognized expert in pediatric emergency medicine and emergency medical systems. He is often called on to address the special needs of vulnerable populations in emergency preparedness planning.

For all its relevance to the nation's current climate of readiness, the Center for Disaster Medicine is but the latest outgrowth of a seed planted several years ago by the late Sheila M. Smythe, founding dean of School of Public Health. In 1999, when threats of terrorism and catastrophic disaster on American soil seemed remote, Ms. Smythe spearheaded the College's first major conference on bioterrorism. In subsequent years, the school hosted an increasing number and variety of educational conferences on pivotal issues of public health, and the College's reputation as a leader in educating healthcare and emergency response professionals was forged.

Now, in a post-9/11 and post-Katrina world, there has been rapid growth in disaster medicine planning for infants and children, persons with disabilities and the elderly. In just its first year, the CDM has become recognized locally and nationally as a technical, scientific and academic resource in disaster medicine—specializing in the needs of these vulnerable populations. The group has become known regionally for providing assistance and training in the particular challenges facing the lower Hudson Valley and Southwestern Connecticut.

A huge, high-risk region

"This region is," says Dr. Markenson, "a huge healthcare environment, with its hospitals, long-term care and other facilities. It's also a high-risk area with all its commuter lines, water supplies for New York City and in the Hudson Valley, and the site of a nuclear power facility. The area is also in the path of any evacuation plan for the enormous and highly concentrated population of New York City. Until last year's hurricanes, most people didn't realize the magnitude of dealing with this responsibility."

Evacuating the 3.1 million residents of the Hudson Valley region is a major task, to say the least. But it pales in comparison to the challenge that would arise if the region were called into service as an evacuation site for more than eight million New York City residents; the total population would triple virtually overnight. One year ago, disaster professionals were just becoming interested in the center's mission of planning for mass evacuation. Since then, plans for a large-scale scenario that were presented, according to Dr. Markenson, "were exceptionally well received."

"The benefit of having an academic program is two-fold. First, we get people out in the field who have real academic knowledge in addition to their on-the-job training. Second, we can build a cadre of future researchers and academicians who can build on what we're doing now."

— David S. Markenson, M.D.

Part of the CDM's mission is to provide local responders with comprehensive program development to prepare for a wide range of emergencies. The staff works closely with the Regional Resource Center in the Hudson Valley that coordinates hospital planning, which is partly funded by grants awarded by New York State. The CDM has also received direct state funding to assist in preparedness in Putnam County. Meanwhile, people in high places have been taking notice. Recently, the CDM was invited by the federal government to play a key role in national-level planning, and was awarded funding to establish the first national preparedness guidelines for persons with disabilities. The grant will also help underwrite a new edition of Dr. Markenson's previously published national guidelines for pediatric preparedness. Federal agencies such as the Centers for Disease Control and

When David S. Markenson, M.D., arrived in September 2005 to head the newly established Center for Disaster Medicine, the world was learning harsh new lessons from still-unfolding events in the Gulf coastal states after Hurricane Katrina.

Prevention, the Health Resources and Service Administration, and the Department of Homeland Security have asked Dr. Markenson and other center staff for guidance when they develop preparedness programs for special and vulnerable populations.

A specialty in its infancy

The Department of Homeland Security's Review of Nationwide Catastrophic Preparedness found that people with special needs require significant and specialized attention. Yet emergency medicine for vulnerable populations is still in its infancy. "Within pediatrics alone, there are only a handful of experts nationwide, and three of them are right here in the center," says Dr. Markenson.

Caring for these special populations in a disaster requires meticulously developed plans and procedures. With this mind, Dr. Markenson has been tasked by the federal government to create a unified set of national guidelines for pediatric emergency preparedness. With those guidelines now complete, Dr. Markenson has turned to writing a similar document for people with disabilities. These urgently needed guidelines will soon be available at healthcare facilities and agencies across the country.

The center is also moving fast to fulfill its equally vital mission of training medical professionals—physicians, nurses and allied health professionals—to act as medical emergency responders. All healthcare professionals, including physicians in any specialty, can receive this training, which may include initiating those not yet well versed in providing disaster care for patients with special needs, and advanced instruction to help more experienced responders enhance their disaster medicine skills.

New challenges, programs, faces

As the CDM grew, so did the need for a full-time manager of its operations and programs. That key executive arrived in June and he is Michael Reilly, M.P.H., assistant professor of public health practice in the School of Public Health, and a seasoned paramedic with extensive experience in emergency preparedness and response. An active trainer for the Department of Homeland Security and a consultant to multiple federal, state and local agencies, Reilly has several publications and his own real-world experience in the field of disaster medical preparedness.

As assistant director of the center, his responsibilities are as diverse as his experience: he manages day-to-day operations; coordinates center research projects; manages and coordinates development of academic programs; supervises interns and research staff; develops presentations for national and international conferences; and oversees publications, advertising and marketing.

Reilly is also responsible for overseeing the School of Public Health's inaugural academic programs in emergency preparedness that began this Fall. He and Dr. Markenson are designing and will direct two new graduate programs in emergency preparedness: a master of public health degree with an emergency preparedness concentration, and a graduate certificate in emergency preparedness.

"The benefit of having an academic program is two-fold," says Dr. Markenson. "First, we get people out in the field who have real academic knowledge in addition to their on-the-job training. Second, we can build a cadre of future researchers and academicians who can build on what we're doing now."

A regional and national planning role

As last year's Hurricane Katrina dramatically demonstrated, there is an urgent need for large-scale, coordinated, effective disaster medicine built on a solid foundation of detailed, centralized planning.

The CDM provides preparedness planning guidance to hospitals and assists in developing benchmarks for hospitals. Currently in development is a preparedness program for the Hudson Valley's schools and EMS organizations. Additionally, the center develops state and national training and research as local pilot programs, nascent models of preparedness that can be later rolled out on a national basis.

Members of the CDM serve as pediatric advisors to the Department of Homeland Security's Office of Emergency Preparedness' Weapons of Mass Destruction courses. "Their senior staff will be coming to the School of Public Health to have us create a set of procedures, tailored just for them," says Dr. Markenson.

One result of such broad scale planning is a set of standardized procedures that don't require new plans from the ground up for each type of disaster. Also being consolidated are the centers that specialize in disaster medicine. "At first, there was an initial flurry to have centers everywhere," says Dr. Markenson. "What's happening over the last several years is that the true academic centers are becoming strong and productive, and the information we are developing is robust, and made to be shared. What

sets us apart from a lot of other centers is that whatever we are working on is made publicly available to any government, academic institution or entity that needs it."

The CDM is not a responder, focusing instead on consultation and education. But it will still play a key role in a crisis. "During an emergency, we can be called upon by a response agency to advise them," says Dr. Markenson. "For example, I'm one of the advisors to the New York City Office of Emergency Management. During the either planning or the actual disaster, I can be called into their command center to advise." Mr. Reilly similarly could provide assistance in the areas of prehospital disaster medicine and hazardous substance emergencies if called in to consult at hospitals in New Jersey.

Accelerating expansion while tackling urgent issues

In the coming year, the Center for Disaster Medicine will be growing at a rapid pace. There are plans to add staff to support expanding programs, develop national guidelines for preparedness for children and people with disabilities and create an enhanced preparedness plan for Putnam County, which will provide a county-scale model that can be applied nationally. The group will spend more time studying information gathered from the Gulf Coast and Texas on how to prepare for disasters and evacuate healthcare facilities while still meeting the medical requirements of vulnerable populations.

One population under careful study is the elderly. "The elderly are particularly vulnerable in a post-disaster environment because they generally have multiple medical problems," says Reilly. "There are often chronic illnesses, as well as medications, that need to be closely monitored. And the elderly in general are more susceptible to certain infectious diseases."

All one has to do is imagine evacuating thousands of bedridden, wheelchair-bound or oxygen-dependent patients at once to recognize the magnitude of the challenge. Developing systems and procedures for evacuation and movement to nearby shelters equipped with power services and specialized medical equipment is "a technical puzzle," says Reilly. "After Katrina, when we visited some of the shelters in the Houston and San Antonio areas, some of the medical problems we were seeing in the older people were basically an exacerbation of their underlying chronic illnesses. Since these individuals weren't able to take their medication, and they couldn't see their doctors to have their scheduled medical visits or procedures, their hypertension or diabetes or emphysema, or whatever it might be, got out of control and became a medical emergency."

Compensating for closed hospitals

Another disturbing scenario that must be considered is what happens if a hospital or similar facility becomes inoperable. The CDM is working with Hudson Valley Resource Center to evaluate hospitals' capacity to make mass patient transfers from one hospital or healthcare facility to another in case of fire, flood or catastrophic system failure.

One strategy is to test small, then go big. Smaller scale disasters or emergencies like heat waves, blackouts or localized flooding can be used to test plans and procedures. "We want to test whether the responding agencies' plans have any holes," says Reilly. "The Center could assist in evaluating the responses of all health-related agencies to determine what, if any, injuries or illnesses stemmed from what occurred. Then we may be able to recommend ways to reduce the number of injuries or illnesses." Meanwhile, the CDM develops specific guidelines that these agencies can use when the next disaster strikes. The result: a better-prepared agency with a more effective response plan.

And what can be done to prevent a healthcare facility from becoming overwhelmed with disaster victims? The federal Health Resources and Service Administration guidelines on surge capacity state that for every one million people, there should be 500 hospital beds for those requiring hospitalization as a result of a bio-terrorist attack or public health emergency. "The question is," says Reilly, "even if we have those 500 beds, are we prepared?" The CDM has been asked to help in answering this question, particularly in the Hudson Valley, by evaluating standards, benchmarks and measurable ways to determine whether or not preparedness goals have been met. "When is enough, enough?" wonders Reilly. "Everyone has their own idea of what preparedness should be, but it's often not in concert with one another."

Michael J. Reilly, M.P.H., employs his own real-world experience in the field of disaster preparedness as he manages daily operations.

As working in concert becomes more and more crucial to disaster response for vulnerable populations, the Center for Disaster Medicine is prepared to lead the way.

This clinic's benefits are two-fold: FOR PATIENTS AND STUDENTS

By Andrea Kott, M.P.H.

It was two years in the planning, and was a cherished dream long before that: a student-run clinic in East Harlem, where poverty, illiteracy, inadequate healthcare access, language and cultural barriers render the community—largely indigent and underinsured—highly vulnerable to chronic disease. There medical students in their first and second years, eager for the chance to work with patients, could apply their classroom learning to heal people with real needs under the watchful eyes of attending physicians.

Meet the co-founders of La Casita de la Salud: Steven Leoniak and Andrew A. Chang are now third-year medical students, while Jessica Safra, Elissa Lapide and Megan Veresh are now fourth-years.

The dream realized is La Casita de la Salud, which celebrated its first anniversary in September. The center is not only exposing medical students to populations at risk for conditions such as asthma, diabetes, obesity, poor nutrition and hypertension; it is also teaching them about the direct interplay among illness, socioeconomic status and culture.

Pranav Mehta, M.D., is assistant professor of clinical medicine and of pediatrics, and assistant medical director for La Clinica del Barrio, Metropolitan Hospital's community-based clinic at 413 East 120th Street, which houses La Casita de la Salud. He says, "The clinic helps give students a snapshot of the health care disparities that often frustrate the profession. It's a good dose of reality."

Students also get the opportunity to work with underserved populations and to see how the experience differs from working with private pay patients, according to third-year medical student Andrew Chang, one of the clinic's founders and currently an on-site supervisor. "The lack of healthcare access is such a rampant problem in the United States," says Chang. "I think it's really important to address the issue and expose students to it early in their medical careers, to show them it's great to get involved."

The idea for La Casita de la Salud, or "little house of health," began in 2003 when a group of medical students proposed the project to Ralph A. O'Connell, M.D., provost and dean of the School of Medicine. Members of the Class of 2007, Megan Veresh, Elissa Lapide, and Jessica Safra, wanted to volunteer in a student-run community clinic and had been researching clinics at other area medical schools. They attended a conference on how to start a student-run clinic sponsored by New York University and Albert Einstein medical schools, both of which have school clinics. Once they had the information they needed, they called a general meeting of all medical students in Valhalla. They established a steering committee with representatives from each class and formed a sub-committee to find a location.

Then they presented their plan to Dr. O'Connell who, in turn, brought it to Richard K. Stone, M.D. '68, senior associate dean at the College and medical director at Metropolitan Hospital. Excited about the idea, Dr. Stone immediately offered La Clinica del Barrio as a site for the student-run clinic. "Dr. Stone thought it was a great way to introduce medical students to the underserved community and provide more opportunities for hands-on clinical medicine," Chang said.

Dr. Stone arranged for the students to present their proposal to attending physicians, to get them on board as voluntary supervisors for one morning every three months. He also lined up two fellowships of $2,100 each, funded by the Metropolitan Medical Board, for students eager to work on the project over the summer. Without the vigorous support of Dr. Stone and other physicians at Metropolitan Hospital, Chang says, “none of this would have happened.”

The clinic was an instant success, according to Dr. Mehta. “It exceeded our expectations,” he says of the clinic’s first year. “Patients have really enjoyed coming to the clinic. We’ve been able to meet their medical expectations. We’ve also helped them socially and this is very satisfying.”

“It’s been a year of learning,” says Stephanie Pepper, a second-year medical student who co-directs the clinic with Benita Liao, a fellow student from the Class of 2009. Starting with three to four patient visits per week, the clinic—which operates on Saturdays from 8 a.m. to noon—now sees five to six patients per week, most of whom are males seeking treatment for primary care issues, such as hypertension and high cholesterol.

Teams of medical students and at least one volunteer attending physician staff the clinic, taking patient histories, performing physical exams, making diagnoses and creating treatment plans. Medical student volunteers work on patient education teams as well, teaching patients about health issues—asthma, diabetes, obesity, cancer and heart disease—that are endemic to the East Harlem community they serve. “That’s what is unique about the clinic,” Dr. Mehta says. “We’re really bringing patient education to patients right there in the waiting areas.”

“The Little House of Health” is the English translation for the College’s first community clinic run by medical students, located in Spanish Harlem and part of Metropolitan Hospital’s La Clinica del Barrio.

There is also a medical student social service team that helps link patients to community organizations for more specialized support and care and evaluates patient eligibility for insurance programs. “We have students that purely take care of patients’ social needs,” Dr. Mehta says. “When patients are done with the medical part, they stop at the social service desk. We give referrals to social services and help get home attendants for elderly patients, as well as housing and food,” he adds.

Noting the importance of cultural competency, Chang says medical students need to understand how language barriers and fear of deportation can discourage people from trying to use the healthcare system in the first place. That is why La Casita de la Salud has a paid Spanish-speaking professional medical interpreter on site at all times. “We are trying to make patients aware that medical care is available for them in a safe environment,” Chang says.

Reporting for duty on a recent Saturday were Benita Liao and Stephanie Pepper, Class of ’09, Lily Lam, M.D., Diana Velez, R.N., Elba Santiago, P.C.A., Pranav Mehta, M.D., and Megan Veresh, Class of ’07.

“By serving those in need, the clinic is helping to nurture students’ humanitarianism,” Dr. Mehta says. “It’s a great opportunity for students. It allows them to volunteer their time for a noble cause. As they go through medical school, we hope they will give back to the community, whether locally, nationally or internationally.”

The chance to support the community they work in draws students and physicians to the clinic, which is currently assessing how many volunteers it will need to treat more patients in the coming year. “Our goal is to increase the number of volunteer physicians, to broaden our patient population, improve community outreach efforts, improve clinic flow and patient follow up,” said Dr. Mehta, who says efforts are underway to create a data base that will reflect patient progress.

To increase community awareness about the clinic, Pepper says she and co-director Liao are collaborating with local churches and organizations on outreach efforts, including community health fairs and blood pressure screenings. The clinic is also trying to recruit more volunteer attending physicians. “In the area we’re serving, a lot of physicians are already doing so much community service,” Pepper says. Adds Chang: “One of the biggest challenges is to get attendings to volunteer. It’s a big commitment to have them be there at 8 or 9 a.m. on a Saturday morning and ask them to work for free,” he said.

But as far as Dr. Mehta is concerned, the rewards outweigh the sacrifices. “There is a not a word I can use to describe it,” he says. “It’s just gratifying to instill a sense of humanitarianism. You couldn’t ask for more.”

"EVOLUTIONARY" INTERNIST DEVOTES EQUAL TIME TO ETHICS AND HOSPICE

Joseph F. Fennelly, M.D. '56, who once counseled the family of Karen Ann Quinlan, believes "It's time to return medicine to its origin as one of the most humane of the sciences."

By L. A. McKeown

While some would call Joseph F. Fennelly, M.D. '56, a revolutionary, he prefers the term evolutionary. "An evolutionary is a revolutionary with a sense of humor," he jokes. This physician, who frequently eulogizes his patients and tries to visit all of his dying patients in their homes, believes medicine—in the broadest sense of the term—can heal not only the patient, but the caregiver as well.

Dr. Fennelly, a practicing internist in Madison, N.J., has been at the forefront of bioethics issues throughout his 50 years in medicine. He has been widely published, has lectured throughout the world and served as chair of the Bioethics Committee of the New Jersey State Medical Society, where he still is co-chair. He was also a founding member and vice-chairman of the Citizens Committee on Biomedical Ethics and remains, at age 76, co-chair of the Ethics Committee at Morristown Memorial Hospital.

Even in medical school, Fennelly was considered somewhat of a rebel. While a student at New York Medical College, he became a member of Phi Lambda Kappa, which at the time was a wholly Jewish medical fraternity. Fennelly and four other non-Jewish students joined the fraternity as a statement that medical fraternities should not be segregated. Eventually, all medical fraternities in the U.S. removed religious, racial and ethnic restrictions on membership.

Patient-centered philosophy

Around the same time, Dr. Fennelly was introduced to the work of Henry H. Kessler, M.D., an orthopaedic surgeon who founded the famed Kessler Institute for Rehabilitation, located in West Orange, N.J. Dr. Kessler, who at the time was a member of the College faculty, showed the young medical students photographs of African children born without limbs who had been helped by orthotic prostheses. "I've never forgotten those pictures," Dr. Fennelly says. "I loved that Dr. Kessler showed us how technology was used to improve the quality of life."

A spiritual man with a deep-rooted sense of humanitarianism and philosophical reflection, Dr. Fennelly believes there is more to medicine than curing patients.

Joseph F. Fennelly, M.D.'56, is part of a vanishing breed of physician. Aside from being one of the last doctors in the New York metropolitan region to make house calls, he now devotes his time to helping the medical profession examine its humanistic values in the care of the dying.

"I think that physicians have a longing for meaning in medicine," he says. "It's a longing also to return medicine to its origin as one of the most humane of the sciences. I believe that medicine has within it the stem cells of healing."

Following through with this philosophy, Dr. Fennelly started a number of programs in the 1960s and 70s, including a holistic health study program and cardiac rehabilitation program, which were considered radical for their time.

Quinlan, Jobes and Schiavo

Dr. Fennelly also started one of the first hospices in New Jersey and helped redesign the intensive care unit at a tertiary-care center from a patient-centered perspective. Later he organized a human values committee to examine how the medical profession approaches the dying patient. This latter undertaking propelled Dr. Fennelly into the much-publicized Karen Ann Quinlan case.

Quinlan was 21 years old in 1975 when she collapsed at a party after ingesting alcohol and the tranquilizer Valium. The brain-damaged woman became a symbol of the early right-to-die movement. During the early days of the media's obsession with Quinlan, Dr. Fennelly was tapped by the Morris County Medical Society to be its spokesperson. The family asked that Karen be removed from the respirator, but were told by the hospital that their wishes could not be legally carried out. In 1976 the New Jersey Supreme Court ruled that the respirator could be removed. After the decision, it was Dr. Fennelly and the family attorney, Paul Armstrong, who prompted the family to maintain her feeding tube. They did support the family's decision to remove the respirator. Karen continued breathing on her own for nine more years before dying of pneumonia in a nursing home in 1985.

Dr. Fennelly says the case brought to light issues previously unspoken, such as a patient's right to die with dignity and the importance of living wills and access to palliative care. It also created a dialogue that led to increased interest in hospice training and pastoral care. Dr. Fennelly says the image of Karen Ann Quinlan being denied both life and death for so many years is emblematic of where medicine has gone awry. The more recent case in Florida of Terry Schiavo reaffirmed his belief and shows how far we still have to go, he adds. Dr. Fennelly also cared for another comatose New Jersey woman, Nancy Jobes, who remained in a persistent vegetative state for seven years after a 1980 car accident that killed her unborn child. As in the Quinlan case, he testified for the Jobes family in New Jersey Supreme Court seeking the right to remove artificial nutrition and hydration.

"We need to tell the same story over and over until people understand it. We need to find a language that resonates with patients and with society," Dr. Fennelly says. "It has taken us 30 years just to translate hospice into the culture of medicine and to make palliative care available."

A lasting legacy

What stands out most in his mind as he thinks back on his career is the strong relationships Dr. Fennelly has had with so many patients and their families over the years. "Despite all our efforts to relieve pain and suffering, it is always an individual journey. I think that is something that can be learned but not taught. You have to be able to suffer through with the patient all the way to the end," he says. Dr. Fennelly even continued a personal relationship with the Quinlan family after Karen's death, visiting her father, Joseph, frequently when he was dying.

As for the legacy he believes he will leave, Dr. Fennelly says, "I feel we owe something back to medicine. I think we need to not only embrace the covenant of Hippocrates but also embrace the Oath of Maimonides … to watch over society."

With that in mind, Dr. Fennelly continues to work tirelessly on bioethics committees. He is an outspoken advocate for

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ALUMNI

Former EMT and 9/11 Survivor LEADS HOSPITALS in Emergency Preparedness

By L.A. McKeown

Like so many people, Nicholas V. Cagliuso, Sr., M.P.H. '98, never could have imagined the trajectory his career would take following the devastating terrorist attacks in New York City, Washington, DC., and Pennsylvania on September 11, 2001.

He believes his training as both an EMT and his graduate education have served him well and put him at the forefront of disaster planning for dozens of healthcare facilities across the country.

Since 2005, Cagliuso has been the coordinator of Emergency Preparedness for the New York-Presbyterian Healthcare System, the largest network of its kind in the U.S., comprising 46 hospitals, specialty institutes and long-term care facilities. In his position, he coordinates emergency preparedness efforts across the system's numerous sites in New York, New Jersey, Connecticut and Texas.

His path to this plum assignment started out conventionally enough. Cagliuso obtained his bachelor of science degree in fire science from John Jay College of Criminal Justice and worked as an EMT and as research assistant to the Medical Director of the New York City Fire Department's Emergency Medical Services. In 1998 he earned his M.P.H. in emergency health services from the School of Public Health and began looking for a new opportunity to use his public policy skills.

Surviving 9/11

In the summer of 2001, just two months before the worst terrorist attack in U.S. history, Cagliuso headed to a new job as a management associate at the Port Authority of New York and New Jersey in New York City. He was there, in the Port Authority's offices in Tower One on the 86th floor of the World Trade Center, on the morning of September 11th.

"All of a sudden, everything that I knew from being an EMT and just the basic survival skills all kicked back in. It wasn't about being a rescuer or responder as much as it was about being a potential victim," says Cagliuso, whose wife was pregnant at the time with their second son. "You're potentially facing being the one on the stretcher instead of being the one pushing the stretcher."

Cagliuso recovered from his narrow escape and soon returned his thoughts to emergency preparedness. At that time, the Port Authority's Office of Emergency Management was staffed wholly by uniformed police officers. The agency soon realized the need to add civilian staff to ensure a more comprehensive approach. Cagliuso applied and spent the next few years as an emergency preparedness analyst. He worked on transportation emergency management issues affecting the Port Authority's 27 regional rail, aviation, port commerce, bus and tunnel facilities. He put his M.P.H. degree to good use as the agency's project leader of the BioWatch program. The federal initiative allocated biological agent collectors in the Port Authority's transportation facilities across the five boroughs of New York and parts of New Jersey.

A notion of terror

"Prior to 9/11, those of us in emergency management and preparedness would often plan for, let's say, large-scale bus accidents or a wide-scale natural disaster. We certainly never had any true notion of terror, and certainly not attacks," Cagliuso says. "We all, I think, had the idea that that sort of thing happens 'over there,' in the Middle East and elsewhere. Even with the '93 bombing of the World Trade Center and the Murrah building in Oklahoma City, we were more focused on day-to-day issues like fires, water main breaks, and multi-vehicle car accidents, plus other urban public health challenges, such as asthma, than on large-scale terror attacks here."

Asked if being surrounded by disaster plans and worst-case scenarios ever depresses him, Cagliuso responds with his ebullient charm. "It's not necessarily easy or fun, but at the same time what I'm doing is very fulfilling and satisfying," he says: "Whether you are talking about terrorist attacks on U.S. soil or broad-scale natural disasters like Hurricane Katrina, the fact is, it will happen again." That notion keeps him going and serves as a warning of the importance of what he and others are doing.

It seems that Nick Cagliuso, Sr., M.P.H.'98, can't stay away from two things: education and emergency services. With degrees in fire science and emergency health services, and an M.B.A. in the works, he balances his job as coordinator of Emergency Preparedness for the New York-Presbyterian Healthcare System with frequent volunteer stints as an EMT.

A dream job

While many of us dread Sunday nights and the return to work on Monday, Nick Cagliuso says he loves them. "Quite honestly, what I am doing is best described as my dream job," he says. "I love what I do and the organization I work for and the people I get to work with. When you're in grad school you wonder, 'Is this right for me?' and now to stand here every day and be able to make these contributions and learn something while I'm at it is just tremendous."

Cagliuso, a genial and upbeat person, says while his job can be tough, it is everything he ever wanted and more. "I always wanted to be involved in health care—the broad notion of health care. There are so many challenges to healthcare preparedness," he says, "not the least of which is that we need to be available no matter what is happening."

When not working, Cagliuso spends time with his wife Jeannine and their sons Nick, Jr. and Christopher. He also is a Ph.D. candidate in Public Policy at Milano: The New School for Management and Urban Policy in New York City, where his dissertation will examine the perceptions of key stakeholders of healthcare emergency preparedness efforts in the United States. Once that is done, Cagliuso says he hopes to find time to return to his EMT roots by volunteering in his community—but not before pursuing an MBA.

"I do miss that human contact that you get, not just as an EMT responding to emergencies but as a patient-care provider in general," Cagliuso says. "Obviously, it's not for the perks or the pay, because the vast majority of EMTs in the United States are grossly underpaid or volunteers, but there's definitely something about it that I miss."

FROM MUSICIAN TO ANATOMY EXPERT:

The Long and Winding Road to Success

By L.A. McKeown

It sounds much like the premise for a TV movie: After a terrible accident ends a promising young musician's career, she enrolls in a university and creates a new life for herself as a respected doctor and mentor. But this isn't fiction. It's the true story of Sherry Downie, Ph.D. '94.

The associate professor in the Department of Anatomy & Structural Biology in the Bronx at the Albert Einstein College of Medicine (AECOM) of Yeshiva University says she never intended to end up where she is today. Chances are most of her students wouldn't have wanted it any other way.

An artist discovers academia

In her early 20s, Sherry Downie began playing guitar and soon found ample work for herself as a professional singer/songwriter. She had a band and sang everything from radio jingles to demos for record companies. "I wanted to be Linda Ronstadt, I guess," jokes Dr. Downie. But at age 29, her music career ended in a freak accident when a railing she was leaning against gave way and she fell from a building. She sustained serious injuries from the accident that left her unable to play or perform for an extended period of time.

Faced with finding a new way to make a living, Dr. Downie enrolled in a veterinary technician's program at Mercy College at age 30. "I chose vet tech originally because I love animals and they don't care if you have scars," she remembers. At Mercy, Dr. Downie stumbled upon her true love, the study of cell biology and anatomy, and dove in headfirst. She says the support and encouragement from her professors helped her realize what she truly wanted. The musician had become a scientist.

Dr. Downie's teaching skills were evident from an early stage. While still an undergraduate, she created a training video to help students understand dissection techniques in comparative vertebrate anatomy. The video would remain a regular component of the course at Mercy College for 15 years. "My first 'aha' moment, I guess you would call it, was when I suggested that we needed to make that training film for anatomy students," Dr. Downie says. "I knew I had found the right field for me."

After graduating from Mercy magna cum laude in 1987, with degrees in biology and English literature, Dr. Downie wanted more, so she headed to graduate school at New York Medical College. There she continued to thrive in the study of cell biology and anatomy. Among her contributions to the small but growing Graduate School of Basic Medical Sciences was co-founding the Graduate Student Research Forum, which is now in its 19th year.

What's a poster?

Dr. Downie says the idea for the forum came about by accident. "A fellow graduate student, Helen Badoyannis, told me she was putting together a poster for presentation at a meeting. I said, 'What the heck is a poster? How do you present it?' She let me help her put the poster together and she described the activities and excitement of a large scientific meeting." The forum was developed to serve graduate students in several ways. First, it lets them present their work and receive feedback before going to a big national meeting. It sounded, she thought, like something students should be exposed to early in their careers. Second, it increases awareness among students and faculty of work that is going on in other departments of the College. And third, it gives students a chance to meet with a nationally-recognized researcher who traditionally gives the keynote address at the special day-long forum.

Once Dr. Downie had completed her Ph.D. in cell biology and anatomy and her postdoctoral training at AECOM, she returned to Mercy College as a full-time faculty member in the Department of Natural Sciences. She was instrumental in developing integrated basic sciences curricula for the allied health programs and taught anatomy, physiology and kinesiology. While at Mercy, Dr. Downie also decided to return part-time to the College as an adjunct faculty member to teach and to serve as a mentor for first-year medical and physical therapy students. At both her alma maters, Dr. Downie developed a long-running series of seminars with prosected cadavers to meet the needs of junior clinical faculty who were beginning to practice in their area of specialty. One faculty member at the College who worked closely with Dr. Downie was Matthew A. Pravetz, O.F.M., Ph.D. '88, associate professor of cell biology and anatomy.

"We knew she was good since she was a student here. She also had very good knowledge of anatomy and she has extremely good teaching skills. It was a perfect fit," Dr. Pravetz says. "One of the things her students always said about [Dr. Downie] was that her energy level was always high," he adds. "She was always so enthusiastic and upbeat. Her enthusiasm truly was contagious." In 2000 and again in 2004, Dr. Downie was awarded a New York Medical College Recognition of Excellence in Teaching Award, which is voted on by the medical students.

In the Graduate School of Basic Medical Sciences, alumna Sherry Downie, Ph.D.'94, is remembered for her skill at breathing new life into her anatomy courses—and for co-founding the Graduate Student Research Forum, now in its nineteenth year.

"Her path was very circuitous, but she brought all her experiences and skills and talents and has molded all of that into being a very wonderful teacher," says Dr. Pravetz.

In 2004, Dr. Downie left her positions at Mercy and NYMC for a full-time position at Einstein's, where she now directs the medical scientist training program anatomy course and is assistant director of the M.D. clinical and developmental anatomy course. She also serves as lab leader and lecturer in medical histology and cell structure.

Dedicated to students

Even in a short conversation with Dr. Downie, her dedication to her students and to improving the field of anatomy in general is obvious. An offhand remark about the "dry" nature of the field elicits a passionate retort from Dr. Downie: "I don't think any student of mine ever found my courses dry. There is so much that is exciting and forward-moving about this field. I love it and I think my students know that."

Dr. Pravetz agrees. "People say, 'what could possibly be new in anatomy?' but there is always a little finding that just makes everyone sit up and take notice. That's one of the great things about Sherry," he says. "Her observational skills are very good."

Although Dr. Downie says she has more clinical articles she'd like to write and publish, her current major publishing project is writing a textbook with co-author Dr. Todd Olson, The book, *Current Clinical Anatomy,*

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"Evolutionary" Internist Devotes Equal Time to Ethics and Hospice

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clean needle exchange programs in New Jersey, where rates of HIV/AIDS in women and children are among the highest in the nation. He has lectured at many major medical schools and hopes for continued opportunities to inspire young medical students in much the same way that he himself was inspired all those years ago by Dr. Kessler.

Dr. Fennelly's parting message reiterates his desire for "medicine, as a whole, to rediscover meaning in itself. We must stress the need for the person-to-person relationship and build medicine around that," he says. "That's what I want to leave you with."

Sherrie A Downie, Ph.D. '94 From Musician to Anatomy Expert: The Long and Winding Road to Success

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will be a completely updated edition for McGraw-Hill that is scheduled for publication in 2008.

In her spare time, Dr. Downie is enjoying her new role as a grandmother. She calls her nearly one-year-old granddaughter Juliette, "the most amazing little girl." A favorite picture of Dr. Downie's shows a happy and wet Juliette taking a bath in the sink at her nana's house earlier this year.

"I have a very full life," Dr. Downie says in all sincerity. "I really feel like I do."

MESSAGE FROM THE DEAN

Ralph A. O'Connell, M.D.
Acting President
Provost and Dean
School of Medicine

It has become the fashion to talk about the "continuum of medical education"—the progression from medical school to residency, followed by the lifelong learning of CME, shorthand for continuing medical education. Some of us may remember summer vacations during medical school, when we used to take a break from our studies—but those were the good old days.

A more accurate phrase might be "continuous medical education," for it truly seems as though the classrooms are never empty. The School of Medicine Class of 2006 graduated in Carnegie Hall in late May; orientation for third-year students beginning their clinical years was held in July; the entering class of 2010 arrived on campus in early August. Residency programs never stop; they end on June 30 and begin again on July 1. Physical therapy doctoral students use the Alumni Gross Anatomy Lab through the summer. Classes in the two graduate schools start right after Labor Day. This complex and exciting process of educating tomorrow's physicians and healthcare professionals is indeed continuous.

The 188 graduates in the class of 2006 did extraordinarily well in the National Resident Matching Program in March, securing residencies at 87 of the top teaching hospitals across the country. The five most popular specialty choices this year were internal medicine (28 percent), pediatrics (15 percent), anesthesiology (11 percent), radiology (10 percent), and surgery (6 percent). We are glad to report our students perform exceptionally well on Steps 1 and 2 of the United States Medical Licensing Examination. All told, the New York Medical College student body is strong, talented, diverse, compassionate—altogether they are an exceptional group of human beings, and we are very proud of them.

The cost of medical school is a major challenge, however, and we regularly grapple with the problem high debt incurred by our graduates during their four years with us. This year 90 percent carried an average debt of $166,000 on graduation. Medical student debt has become a national problem, raising concerns as it begins to affect career choice. The College has renewed its commitment to increasing endowed scholarships and made it a major goal for fund raising this year.

Going into Academic Year 2006-2007, the admissions office received 9,647 completed applications for 194 first-year positions in the medical school. The seated class comprises graduates of 93 different colleges and universities and residents of 27 states; 54 percent are women. These aspiring doctors are already immersed in anatomy, histology and cell biology. Their futures will likely include graduate medical education (GME), another important component of our academic mission. The College sponsors 90 GME programs, with 1,300 residents in the full range of major medical specialties and subspecialties. In 2006, 407 residents and fellows completed their training with us. The College also offers a comprehensive array of CME programs for its faculty and community physicians. At the close of 2005-2006 there were 41,192 attendees at College-sponsored CME conferences and grand rounds.

Medical education is a complex task requiring a devoted faculty, modern educational facilities, excellent teaching hospitals and comprehensive library services and informatics capabilities. Success relies on the support of faculty, administration, alumni, the board and the students themselves. By those criteria, New York Medical College's educational mission is successful. Faculty committees are essential to the process: admissions, curriculum, tenure and promotions, graduate medical education, library and continuing medical education. I am grateful to all the members of the New York Medical College community for their continuing support and look forward to another year of "continuous medical education."

MICHAEL ARDUINO, M.S. '81,

TRACKS AND KILLS GERMS **FOR THE CDC**

By Kimberly Gaudin de Gonzalez

Michael Arduino, Dr.P.H., M.S. '81, never expected to learn so much about plumbing and water treatment when he accepted a job as microbiologist in the Hospital Infections Program at the Centers for Disease Control and Prevention (CDC) in Atlanta, more than 19 years ago.

While he had headed south to the University of North Carolina at Chapel Hill to pursue a doctorate and a career in public health at the CDC, it was his expertise in microbiology, mastered in the classrooms and laboratories of New York Medical College, that helped him get his foot in the door.

Today Dr. Arduino is the lead microbiologist in the Epidemiology and Laboratory Branch of the Division of Healthcare Quality Promotion at the CDC. He well remembers his first investigation:

"In 1988, I was finishing my doctoral studies at the University of North Carolina, School of Public Health, and I was working on it at the CDC," he reminisces. "It turned out that down the hall in the Hospital Infections Program, they were looking for somebody with knowledge about mycobacteria. Apparently there was an outbreak of arterial venous graft-related infections in a dialysis facility in Fresno, California, and the program needed somebody who understood the process of killing mycobacteria. That's where my degree in microbiology came in handy."

Dr. Arduino and a team of researchers found that the dialysis facility had previously been using formaldehyde to reprocess dialyzers for reuse

Michael Arduino, M.S. '81

on the same patient, and had later switched to a commercial disinfectant. They discovered that water used to rinse the dialyzers and prepare the disinfectant contained mycobacteria, and the dialyzers were being contaminated with every cleaning. The result was a rash of infections among patients with four out of five of them developing arterial venous graft-related infections. Two of the patients had died.

When Dr. Arduino's research showed that the commercial germicide they were using was insufficient to kill mycobacteria, the program directors were able to correct the problem. With this display of scientific detective work, his career took off, and he quickly became the resident expert on dialysis, water treatment and disinfectant issues.

"The work we do has made an impact on dialysis-associated disease—especially bacterial infections," Dr. Arduino said. "The recommendations that we wrote for the dialysis community for the prevention of blood-borne virus infections in hemodialysis centers have now become standard practice—even with HIV patients. We described a specific handwashing procedure, appropriate barriers like gloves and gowns, and other measures. The end result was we have succeeded in re-educating people, and the number of infections in the dialysis center setting has dropped way down."

Dr. Arduino's laboratory also investigates outbreaks of disease in healthcare settings. In one recent case, 15 infants in a neonatal intensive care unit were discovered to be infected with a yeast-like organism called *Malassezia pachydermatitis*, an infection commonly found in the ears of dogs. After discovering extensive literature confirming the connection between *M. pachydermatitis* and canine ear infections, the team collected hand cultures of personnel and ear cultures of any dogs they owned. Twelve dogs, a healthcare worker and all of the infected infants in the NICU, as well as 9 others, were found to have identically patterned organisms.

"People come to us with questions, and we often have to reenact what happens in the institution to get to the bottom of it. Our theory in this case was that the organism was introduced into the intensive care nursery on healthcare workers' hands after they petted their dogs at home," Dr. Arduino said. "Hand washing breaks were corrected, and the problem was resolved."

The lab spends a fair amount of time testing for contamination in over-the-counter products such as nasal spray or contact lens moisturizer, and looking at infection outbreaks

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RICHARD HIRSH, M.D. '69, HELPS BRING MAMMOGRAPHY to Underserved Regions Abroad

By Andrea Kott, M.P.H.

Richard Hirsh, M.D. '69, likens Radiology Mammography International (RMI)—the non-profit organization he founded in 1996 to bring mammography and breast cancer education to underserved regions around the world—to the adage about teaching people to fish so they can eat for a lifetime. "We teach them to fish," he says, "and leave the pole."

The "pole," in this case, is the education, training and technology needed to screen for breast cancer. Twice a year, on his own time and free of charge, Dr. Hirsh conducts mammography missions, visiting developing countries and underserved parts of the world. He brings a team of 8 to 12 volunteers—x-ray technologists, engineers, radiologists and women's health educators—to help him train local radiology and x-ray technologists, diagnostic radiologists and surgeons in the use of mammography equipment. In addition to hands-on training in parts of the world as far-flung as Nepal and Bulgaria, Dr. Hirsh provides assistance in the form of donated mammography equipment. He lectures general medical and surgical doctors about mammography and breast cancer. And he assigns spokespeople, often the spouses of members of Congress, to perform community outreach by educating the public about breast cancer and the importance of screening for early detection.

"Breast cancer is one of the greatest causes of cancer death among women in many developing countries," Dr. Hirsh said. "It knows no cultural, ethnic or religious boundaries. It's an equal opportunity disease."

Richard Hirsh, M.D. '69

Dr. Hirsh became interested in mammography missions years before he established RMI. In 1989, he read about a mammography education project in India that called for volunteer radiologists. He took a two-week leave from his job as a general diagnostic radiologist at Summa Health System in Akron, Ohio, and joined 25 volunteer radiology specialists on a mission to teach mammography technique and interpretation in nine different cities in India. "That sort of lit the candle," said Dr. Hirsh, who is also assistant professor of radiology at Northeastern Ohio Universities College of Medicine. "I enjoy teaching, and here was an adventurous way to pass on my teaching and training, to give back. It was an extraordinary experience."

Other missions followed, including one in 1994 to Kathmandu, Nepal, where he spent three weeks setting up donated mammographic and film processing equipment and teaching the requisite skills to technologists and radiologists.

Donated equipment, as well as monetary donations, are essential for RMI since the cost of travel, lodging and food for each mission can amount to $3,000 per person. A number of private companies have donated mammographic equipment as well as film, x-ray view boxes and other supplies. Nevertheless, Dr. Hirsh is always looking for grants and private donations to fund the organization's work. "These donations are the quality assurance keys to the success of our mission," he said.

The success is often immediate, as it was during a 1999 mission to Managua, Nicaragua, where Dr. Hirsh trained four female x-ray technologists at The Hospital for Women. As word of his mission spread, more and more female technologists from other hospitals showed up, asking to participate. "Within two weeks we'd trained a total of 19 female x-ray technologists," he said.

So far, Dr. Hirsh has conducted 15 missions in China, Honduras, Bulgaria, Nicaragua and other countries. He tries to visit the same country more than once, so he can follow up on the training he has conducted and, when possible, provide improved technology. He also works to establish relationships with ministries of health and with key government figures in the countries where he works. His goal is to garner as much local support as possible.

In Washington, D.C., in 1999, the Congressional Families Action for Cancer Awareness Program honored Dr. Hirsh for his international humanitarian work and for founding RMI. And, while proud of the recognition, Dr. Hirsh derives the most satisfaction from the work itself. "I receive a special type of joy and fulfillment that no words in my mind can adequately describe," he said. "The tougher the mission, the more satisfaction I receive." ♦

RENEE KOHANSKI, M.D. '90, Is What Forensic Psychiatry and Talk Radio HAVE IN COMMON

By Andrea Kott, M.P.H.

Sooner or later, everyone falls into an occasional rut. Most people, no matter how fascinating their work, get bored. That is, of course, unless they find a way to mix it up. Take Renee Scharfman Kohanski, M.D. '90, for example. The forensic psychiatrist, private-practice therapist, former radio talk show host, and soon-to-be podcaster, didn't set out to put so many irons in the fire. She discovered most of her ventures (except medical school) somewhat by happenstance. Since she enjoys them all, her life is busy. It is also extremely interesting.

"I went to medical school to be a pediatrician," Dr. Kohanski said, sounding somewhat surprised at how her path diverged. "I remember my first rotation; there we were sticking needles into babies and making them cry and I thought, what am I going to do? I don't want to make babies cry!" She found the answer on her second rotation: psychiatry. "One week into my psychiatry rotation I knew I had found my love."

Dr. Kohanski has always been fascinated by the workings of the human mind—and just as fascinated by the relationship between the mind and the legal system. Enter the two influences that changed her life. They were a psychiatry residency at Georgetown University Hospital in 1990, where she discovered forensic psychiatry, and retired U.S. Colonel Donald Morgan, M.D., whom she met during her forensic psychiatry fellowship at the William S. Hall Psychiatry Institute at the University of South Carolina in 1994.

Renee Kohanski, M.D. '90

While working with Dr. Morgan, Dr. Kohanski was appointed the lead forensic psychiatrist for the capital murder trial of an inmate who was charged with killing a police officer and later, a fellow inmate. While the inmate was on death row, Dr. Kohanski provided the psychiatric treatment that restored him to competency to stand trial. "From that one case, I learned about every forensic issue there is for a young psychiatrist to learn," she said with fresh excitement. "I went to some of the deepest, dreariest jails," she said. "Here I am, this little Jewish woman with this heavy New York accent, and I absolutely assimilated into it."

As Dr. Kohanski sees it, kismet has graced her life more than once. Discovering her love of psychiatry, meeting and falling in love with her husband, Phillip Kohanski, M.D. '87, (a radiologist and former lieutenant colonel in the U.S. Army), and working with the mentors who introduced her to forensic psychiatry were all connected blessings that she traces to having attended New York Medical College. (Her brother, Robert Scharfman, M.D. '89, an ophthalmologist, is also an alum.) It was at the College, literally over a cadaver in anatomy lab where he was serving as a teaching assistant, that she met her husband, with whom she has two children, David Jared, 5, and Anna Patricia, 10. Her training at the College qualified her to testify as an expert witness in court cases, which in turn led to invitations to guest host radio talk shows and ultimately to host her own shows. "New York Med has given me my life," she said.

Dr. Kohanski began her stint as a radio guest host in 1997 in Augusta, Ga., where she lived during her forensic psychiatry fellowship. Her interest in radio continued when she and her husband relocated to Norwich, Conn., in 2000. Doing talk radio appealed to Dr. Kohanski, who saw the need to make solid information accessible to the general population—facts about psychiatric conditions and diagnoses, drug and alcohol abuse, or the dangers that over-the-counter medicines pose to the elderly. "I get to give a lot of people information and fill a void that I believe is not being met," she said. Eventually, Dr. Kohanski began hosting her own talk shows, including "Let's Talk," and "Kohanski's Connecticut," all while continuing to practice psychiatry part-time.

She still maintains an active part-time private practice in New London, Conn., focusing on individual psychotherapy and psychopharmachology, rather than forensic psychiatry. "While I love forensic psychiatry, particularly the criminal aspects, it often requires travel and other obligations that are simply not conducive to family life," she said. She reached the same conclusion about maintaining her own weekly radio show. "Kohanski's Connecticut" was an excellent opportunity to reach 25,000 people in a powerful way, but the prep time was overwhelming," she said. "With two young children at that point, the costs exceeded the benefits."

Dr. Kohanski still makes regular guest appearances on the nationally syndicated radio talk show "A Touch of Grey" and on the local broadcast station WICH. *Talkers* magazine, a publication for the radio industry, approached her about developing a series of shows for a podcast, scheduled to air this fall. (For the uninitiated, podcasting is a method of distributing audio, music or video programming over the Internet for viewing or listening on a computer or other digital device, such as an iPod.) The series will cover general-interest topics in psychiatry, such as the difference between depression and sadness, the purpose of medication, and how to know when someone is overmedicated. As she does with so many events in her life, Dr. Kohanski credits her medical education for this latest opportunity. "Were it not for New York Med, and in particular the support of Susan Kline, [M.D., vice provost, university student affairs, and executive vice dean, academic affairs]," she said, "I would not have this amazing life." ♦

ALUMNI REVEL IN REUNIONS and honor two of

The week leading up to the 147th Commencement exercises in Carnegie Hall on May 24, 2006 was a busy one for many. Members of the Class of 2006 spent their last few days on campus making sure all the i's were dotted and t's were crossed so they could receive their diplomas on the grand stage. There were cap and gown fittings, graduation practices, ceremonies and receptions, not to mention packing up belongings and medical school memories before moving on to life as a resident. Staff and administration were on the go, making sure all last minute details were attended to for the pomp and circumstance at Carnegie Hall. And alumni were getting ready to revisit their medical school days at the alumni reunion weekend.

The annual alumni banquet was held at the Waldorf~Astoria in New York City on May 20 to celebrate the 50th and 25th reunions of the Classes of 1956 and 1981, where gold and silver diplomas were awarded. Two distinguished members of those classes, Arno R. Hohn, M.D. '56, and James J. Cimino, M.D. '81, were recognized for their extraordinary contributions as physicians, educators, and scientists and in their respective fields of pediatrics and biomedical informatics and medicine.

The day after the banquet, alumni from the Classes of 1941, 1946, 1951, 1956, 1961, 1966, 1971, 1976, 1981, 1986, 1991, 1996 and 2001 flocked to the Valhalla campus for the five-year milestone reunion luncheon, campus tours and the Alumni Association annual meeting.

Louis E. Fierro, M.D. '60, left, immediate past president of the Alumni Association and member of the Board of Trustees, Ralph A. O'Connell, M.D., second from left, provost and dean of the School of Medicine, and Christopher F.X. Riegler, M.D. '88, right, president of the Alumni Association, took a break from the festivities to pose with medal of honor recipient James J. Cimino, M.D. '81.

The Class of 1956 was happy to reunite and receive their gold diplomas. Back row from left: Martin E. Rose, M.D., Richard J. Golinko, M.D., William F. Varr, M.D., Sanford Sherman, M.D., Donald A. Peck, M.D., James B. Leach, M.D., George T. Hare, M.D., Martin H. Floch, M.D., and William L. Hart, M.D. Center row from left: Alfonso Richards, M.D., Sara B. Arnaud, M.D., Toni G. Novick, M.D., Joseph Fennelly, M.D., Arno R. Hohn, M.D., Jerold Schwartz, M.D., and Frederick Cushmore, M.D. Front row from left: Harold J. Luria, M.D., Dorothea Zucker-Franklin, M.D., Stephen N. Rous, M.D., Naomi Goldstein, M.D., Suzanne Haynes-Sword, M.D., Lina R. Merlino, M.D., Joseph J. Macy, M.D., and Donald J. Bradley, M.D.

Sharing the celebration of their 25th reunion are former classmates and old friends from the Class of 1981. Back row from left: Robert P. Driscoll, M.D., Kenneth D. Kushner, M.D., William C. Reha, M.D., Michael F. DeBruin, M.D., Edgar H. Ballenas, M.D., Orest J. Kozicky, M.D., Michael Innerfield, M.D. and Eric J. Feldman, M.D. Center row from left: Wayne M. Dankner, M.D., James J. Cimino, M.D., Edgar Borrero, M.D., Sam F. Frankel, M.D., Joseph W. Gaffney, M.D., and Seth A. Steinman, M.D. Front row from left: Anne Nucci-Sack, M.D., Stephanie C. Buck, M.D., Mary Ellen Revenis, M.D., Deborah White, M.D., Pamela Stratton, M.D., Mariana S. Markell, M.D., Ilene Newman, M.d., and Patricia Montaperto, M.D.

The Class of 1966 was represented by J.C. Jurgensen, M.D. '66, left, and James L. Januzzi, Sr., M.D. '66, and their wives Joan and Louise.

their own

Jerold Schwartz, M.D. '56, and wife Bunny, left, caught up with former classmate Sara B. Arnaud, M.D. '56.

Sam F. Frankel, M.D. '81, reminisced as he browsed through his old yearbook with his wife Claire.

Stephen M. Silverman, M.D. '81, proudly displayed his silver diploma alongside his wife Miriam.

Medal of honor recipient Arno R. Hohn, M.D. '56, center, spent time with his former classmate and roommate, Richard J. Golinko, M.D. '56, and Dr. Golinko's wife Joan.

MILESTONES

Two Thousand Five

Falgun H. Chokshi, M.D. '05, is in residency in diagnostic radiology at the University of Miami/Jackson Memorial Hospital in Miami, Fla.

Thomas C. Hawes, M.D. '05, is doing an anesthesiology residency at Yale University Hospital in New Haven, Conn.

Patricia C. (Puzio) Primakov, M.P.H. '05, M.S. '03, who is working in microbiology and clinical research administration, married **Denis Primakov, M.D. '03,** on December 3, 2005 in Norwood, N.J. Dr. Primakov works in the department of medicine at North Shore University Hospital. The couple lives in Manhasset, N.Y.

Erin Stevens, M.D. '05, is completing a residency in obstetrics and gynecology at Stony Brook University Hospital on Long Island.

Robert W. Trimble, M.D. '05, is doing a residency in internal medicine in Washington, D.C.

Two Thousand Four

Antonia N. Aphantitis, M.P.H. '04, is attending law school at the University of Ottawa in Canada.

Richard Oeckler, M.D. '04, is the recipient of the 2006 Mayo Brothers Distinguished Fellowship Award from the internal medicine residency-training program of the Mayo School of Graduate Medical Education. The award, which is based on outstanding clinical performance, humanitarian features and scholarly activity, is given to one internal medicine resident each year. Dr. Oeckler is in his third year of residency and will enter the clinical investigator track for his fellowship in pulmonary and critical care medicine at the Mayo Graduate School of Medicine in March 2007.

Eugene Valsky, M.D. '04, is doing his residency in internal medicine at Boston University Medical Center.

Two Thousand Two

Kevin M. Bergin, M.P.H. '02, has established a business refurbishing medical equipment, including anesthesiology monitors, electric wheelchairs and ECD/EKG equipment.

Meredith M. (Grieger) Kelly, P.T. '02, got married in January 2004 and relocated to Atlanta, where she has been working for NovaCare Rehabilitation, managing a two-therapist clinic, as well as working with the Gwinnett Gladiators hockey team.

Amy T. Magneson, M.D. '02, graduated from the Bronx Lebanon Hospital Center obstetrics-gynecology residency program in June and will be an assistant clinical professor of ob-gyn at the Allen Pavilion of Columbia University Medical Center. Dr. Magneson is also the mother of son Logan, who was born in July 2005. "Life is good."

Two Thousand One

Carlos G. Cardillo, M.P.H. '01, is doing research for the U.S. Department of Defense at the Henry Jackson Foundation for the Advancement of Military Medicine in Rockville, Md.

Arie Pelta, M.D. '01, is completing his chief year in general surgery at the North Shore-Long Island Jewish Medical Center in New Hyde Park, N.Y. Dr. Pelta recently matched in a colorectal surgery fellowship in Atlanta.

Debra Richardson, M.D. '01, has graduated from an obstetrics-gynecology residency at the University of Connecticut and is going to the Mayo Clinic for a two-year fellowship in women's health.

Two Thousand

Shariq Ali, Ph.D. '00, M.S. '99, is working as the New York-based medical scientific liaison for Alexion Pharmaceuticals, Inc., a biotech company based in Cheshire, Conn.

Marc-Daniel Gutekunst, M.P.H. '00, Ph.D. '93, is a visiting scholar at Emory University in Atlanta, working on a textbook, *Selected Health Systems of Africa*, and serving as a senior mentor to three public health graduate students at the university's school of public health. Dr. Gutekunst also co-chairs, with Ambassador Andrew Young, Forging New Tomorrows, Inc., an Atlanta-based international organization dedicated to improving global health, education and training, and the environment. Over the years, FNT has supervised medical research projects at the Centers for Disease Control and Prevention, supported three hospitals and conducted environmental research in Rwanda and in the United States.

Matthew McLaughlin, M.D. '00, has been hired as a physician at Kaiser Permanente in Sacramento, Calif. Dr. McLaughlin, who specializes in family practice, completed his internship and residency at the University of California, Davis Medical Center in Sacramento. He previously practiced at Regency Urgent Care Medical Corporation in Yuba City.

Neha Patel-Iyengar, M.D. '00, has joined the medical staff of St. Francis Hospital and Health Center in Blue Island, Ill.

Vanessa A. Ribaudo-Kaufman, M.D. '00, married Michael Kaufman on June 18, 2005. Dr. Ribaudo completed her residency and chief residency in internal medicine at Beth Israel Medical Center in New York, where she is currently in her second year of a pulmonary and critical care medicine fellowship.

The Nineties

Sonny Lee, M.D. '99, his wife Miwa and their daughter Mika, welcomed the arrival of Marika, born on March 24, 2005.

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HUMANITY IN MEDICINE is all in the MIGNONE FAMILY

By Kimberly Gaudin de Gonzalez

When Biagio Mignone, M.D. '75, came to the U.S. from southern Italy at the age of 9, with seven brothers and sisters and parents who had not studied beyond the fourth grade, who would have predicted that one day he would have his own ophthalmology practice, a wife who oversees healthcare in an affluent Connecticut school district, and a son set on following in his footsteps?

Dr. Mignone met his wife, Kathleen Nevin, M.S.'73, R.N., at a party in 1973 when they were both students at New York Medical College. She was in the last class of nursing students to graduate from the College, when it was still located at Flower and Fifth Avenue Hospitals in Manhattan.

"A friend of mine was throwing a party and was concerned that no girls would come," recalled Mrs. Mignone. "So I went. And Biagio came up to me and told me his name. I said 'Biagio' that's nice, but what is your first name?" She laughed. "The rest is history."

The two married the following year, and together had four children—Richard, Joseph, Paul and Kathleen. Richard, who suffered from biliary atresia (a congenital condition resulting in obstruction of the bile ducts), underwent two liver transplants during his short life and died at the age of seven. Joseph now works as an assistant in the ophthalmology office that his father established, and their daughter is finishing her studies at Manhattanville College in Purchase, N.Y.

Last May, Dr. and Mrs. Mignone stood side by side with their son, Paul Mignone, M.D. '06, at Carnegie Hall moments before he graduated from their alma mater. Paul, too, plans to become an ophthalmologist, and will begin his residency at St. Luke's Roosevelt Hospital in Manhattan after finishing a transitional year program at Deaconess Medical Center in Spokane, Wash. The journey to Carnegie Hall seemed remarkable in many ways. Each of the Mignone alums had taken different paths, but stayed true to their passion for healthcare. Here are their stories:

Biagio Mignone, M.D. '75, and his wife, Kathleen Nevin Mignone, M.S. '73, R.N., beamed with pride when son Paul Mignone, M.D. '06, graduated in May.

Biagio Mignone, M.D. '75

When the senior Dr. Mignone was still in high school, his curiosity was piqued by biology and he became interested in being a doctor. He had no idea how he was going to afford it, since his father had a small factory job and a large family to support. So the young man joined the Army, which paid for two years of his medical education, and the College offered additional financial assistance.

Now the owner of Mignone Medical Eye Care in Yonkers, N.Y., Dr. Mignone translates his gratitude for the help he received into generosity toward others.

"Probably the most exciting parts of my career have been my trips to the Dominican Republic," said Dr. Mignone, who has traveled to the Central American country four times on surgical missions, providing eye surgery for people who could not otherwise afford it.

Cataract surgery, in which the clouded lens is removed and replaced with an artificial one called an intraocular lens, is the most frequently performed surgery in the United States—and the most successful. More than 95 percent of those who have cataract surgery regain vision levels between 20/40 and 20/20.

"Yet the people we see in the Dominican Republic don't have access to it," he said. "In operating on them, I give them back their livelihood in less than an hour."

In 2004, at the suggestion of his wife, Dr. Mignone took his son Paul with him on one of his trips to the Dominican Republic, thinking the young man might get something out of the experience. He never dreamed the impact it would have.

"When Paul was leaving the island he said, 'I loved it. I think I'm interested in ophthalmology,'" said Dr. Mignone, who is also an assistant clinical professor of ophthalmology at the College. "It wasn't something I'd been pushing him into, but I was thrilled. If he does decide to go into practice with me, it would be an honor to operate with him, to share patient experiences with him."

He said he appreciates the respect for humanity that the College instills in its students. During his son's time at the school, Dr. Mignone witnessed the "Convocation of Thanks," an 18-year tradition where students pay homage and give thanks to those they call their first patients and teachers, the anatomical donors, and their surviving family members.

"That really touched me, and reminded me that the College has always taught respect for human life. It sets an emotional tone that is rare in medical school," he said. "I really think this is one of the best schools in the country."

Kathleen Mignone, M.S. '73

When her son, Richard, died after years of illness and suffering, Kathleen Mignone thought she might never want to work in pediatrics again. So she took her time, working as a home health care nurse specializing in geriatrics. Eventually she realized where her true interests lay, and focused her work efforts on the well-being of children. Today she oversees policy, procedure and training for the 20 nurses in the Greenwich School District in Connecticut, and serves as a liaison between the district and parents.

"Nowadays, we have so many children with allergies, with

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BARBARA KENNEDY, M.P.H. '96, Takes a Personal Look at CARE GIVING

By Kimberly Gaudin de Gonzalez

Accomplished artist, writer, social worker, mediator and retired investment advisor, Barbara Kennedy, M.P.H. '96, said she drew from all aspects of her education, professional and personal life when she wrote her book, *Second Chance Ranch*, about the journey of a caregiver who is tending to her dying husband.

Although her book is not autobiographical, Ms. Kennedy said she based much of it on firsthand knowledge after losing her husband, Paul Smith, to lung cancer in 1999. Profits from the sale of the book are being donated to a local hospice. She also plans to donate part of future proceeds to the Make-A-Wish-Foundation, a cause that she and her late husband supported.

Lauded by one hospice administrator as a poignant look at the exhausting, emotional roller-coaster ride that characterizes the daily experiences of caregivers, *Second Chance Ranch* emphasizes the need for empathy and forgiveness.

"From my long-term hospice work and personal experience and also from my own caregiving experiences, I can say that Ms. Kennedy has captured 'our stories' and also poignantly conveyed the way to heal ourselves…to forgive, forgive, forgive," wrote Fred McDaniel, executive director of HospiceCare, Inc. in Park Hills, Mo., who reviewed the book on Amazon. "Most hospice workers tend to see the beginning of a situation as the moment they step into it, but the truth is, hospice patients and their families had a whole life before the hospice worker arrived on the scene. The book helps us to see the bigger picture. It will energize or reenergize empathy for these courageous people, the caretakers, and emphasize why it is so important for us to do our work with excellence and compassion. We only have one chance to get things right," he concluded.

Barbara Kennedy, M.P.H. '96

Ms. Kennedy, however, believes in second, third and maybe even fourth chances in life. She continues to add to her knowledge base, and to build upon her career. She had been a bond trader on Wall Street for more than 20 years when she became interested in behavioral science and health promotion. She decided to enter the master of public health program at New York Medical College, in what was then known as the Graduate School of Health Sciences. It is now the School of Public Health. This year, she completed her M.S.W. at Arizona State University. She is working as a cognitive behavioral therapist and mediator when she is not writing and lecturing.

"My M.P.H. degree helped prepare me for my time as a caregiver to Paul," she said. "I understood the healthcare system, and was able to dialogue with physicians more effectively and to navigate the extensive medical research—and perhaps this knowledge helped to extend his life and provide a quality end of life."

And if her other accomplishments were not enough, Ms. Kennedy began making papier mache bowls in her kitchen, working with her hands. After her husband died, she made one bowl each day for two months, and has 60 in all. She refers to them as vessels of grieving. Several were featured recently in *PaperWorks Magazine*, and this fall the bowls will go on display as part of a Cultural Arts Commission Forum at Arizona State University. Ms. Kennedy will be panel moderator for a community discussion on the role art plays in healing and wellness.

Believing that every aspect of her life has value, Ms. Kennedy quotes writer Lillian Smith: "I went on this journey to find an image of the human being I could be proud of. I had to find what I believe, what is meaningful in human experience, for me; what is the creative meaning of ordeal?"

For Ms. Kennedy, art and writing are the creative means she uses to help her understand her personal journey and how it has transformed her into the person she is today. She uses creativity and expression in her therapeutic process with clients, especially when loss and grieving are complicated and confounded.

"Narrative Therapy [a model of clinical therapy] can be an effective method of grieving," she said. "I've learned to go to the events that formed my character, go to the disappointments that shaped my personality, and to speak my story."

"Where do I begin?" her clients have asked. "Anywhere you like," she encourages them. ♦

MILESTONES

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Keith P. Meslin, M.D. '99, is director of colon and rectal surgery at the southern Ocean County Hospital in Manahawkin, N.J.

Steven Moore, M.D. '99, is practicing sports medicine and newborn/infant care in Tucson, Ariz.

Rodney S. Gonzalez, M.D. '98, is working on a fellowship in primary care sports medicine at the Uniformed Services University of the Health Sciences in Midland, Ga. Dr. Gonzalez is also working as the team physician for George Mason University in Fairfax, Va.

Jeffrey H. Hsu, M.D. '97, completed a fellowship in vascular surgery at the University of Rochester's Strong Memorial Hospital and is practicing at Kaiser Permanente in southern California.

Scott Leroy, M.S. '97, is the director of health for the Danbury Department of Health, Housing and Welfare in Danbury, Conn.

Sunit H. Patel, M.D. '97, a pediatrician, was married in October 2002 and became the proud father of Maya on December 27, 2005.

Carrie Riopel Mousseau, M.D. '97, is practicing internal medicine at the HealthNOW Medical Center in Sunnyvale, Calif. Dr. Mousseau and her husband Chuck have one daughter, age 3, "the joy of our lives." Both are still playing soccer and enjoying life.

Alec M. Schwartz, M.D. '97, completed board certification for the American Board of Urology and has started a Manhattan-based practice, Manhattan Urology Associates, with a colleague.

Daryl Story, M.D. '97, a neurologist, is in practice with Neurology Associates of Norwalk, Conn. Dr. Story, who completed his internship in internal medicine at Yale New Haven Hospital and his residency training in neurology through the Yale University School of Medicine's department of neurology, is certified by the American Board of Psychiatry and Neurology, and has conducted extensive research on stroke.

Rebecca K. Calabrese, M.D. '96, board certified in internal medicine and certified by the American Society of Bariatric Medicine, is affiliated with Crystal Run Healthcare in New York.

Efrat (Effie) Lobel-Katz, M.D. '96, is working as a gastroenterologist at Kaiser Permanente in Woodland Hills, Calif.

Linda Kruse, M.P.H. '96, is living in Cortlandt Manor, N.Y.

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MICHAEL T. MURRAY, M.D. '93, Displays Plenty of Backbone in Career Choices

By Kimberly Gaudin de Gonzalez

Changing jobs is nothing new to Michael T. Murray, M.D. '93. At least this time, he's not changing professions. So far, Dr. Murray has been a police officer, twice a flight surgeon in the U.S. Navy, and an assistant professor of orthopaedic surgery at Columbia University's College of Physicians and Surgeons. But as his focus and expertise continues to narrow, he's determined to be the best spine surgeon he can be.

In September, Dr. Murray joined the faculty at New York University Hospital for Joint Diseases in the Department of Orthopaedic Surgery. "They have a great reputation for spinal surgery," Dr. Murray said of his new place of employment. "And they are expanding that reputation by committing to research and by creating a spine center. It is really a great opportunity for me to grow as a spine surgeon and work with some of the most well-known people in the field."

…I want to know as much as I can about new techniques and how they affect my patients.

As assistant professor of orthopaedic surgery, he also counts on having access to a national outcome study on artificial discs implanted in the lumbar spine. Other cutting edge research there includes a study on electrical stimulators in the spine for patients with chronic pain. In addition to the benefit of keeping him current and well-trained in the latest techniques, he's also privy to investigations on the effects of nutrition on outcomes in patients undergoing major spinal reconstruction, as well as research on spinal fusion in diabetic patients.

"What I do is hard work, and I want to know as much as I can about new techniques and how they affect my patients," said Dr. Murray, who completed the second part of his board certification for orthopaedic surgery in July.

Hard work is nothing new to Dr. Murray. He is still an active member of the naval reserve. During medical school, he worked nights as a uniformed officer in the NYPD. It had been his many visits to New York City emergency rooms as a police officer that had first generated his interest in medicine.

When he finished med school, he received a special award in urology, the specialty in which he had already matched at a military hospital at Fort Gordon, Ga., where he did his internship. But fate stepped in, and instead Dr. Murray became a naval flight surgeon with VMA 223, based at Marine Corps Air Station, Cherry Point, NC. During his tour, he worked on sprains, broken bones and athletic injuries, and decided that orthopaedics, not urology, was where he was headed. He was to narrow his focus even more as time went by.

He performed his residency at Saint Vincent Catholic Medical Centers in Manhattan. While a resident,

Michael T. Murray, M.D. '93

Dr. Murray became increasingly interested in spinal disorders, completing several research studies in scoliosis. Toward the end of his residency, his plans to begin a spinal surgery fellowship at the University of California, San Francisco (UCSF) were delayed when he was mobilized for Operation Enduring Freedom, but never sent overseas. He served for a year with HMH 772, a United States Marine Corps helicopter squadron, as an orthopaedic flight surgeon.

His tour of duty over, Dr. Murray entered the spinal surgery fellowship at UCFS in August 2003, where he discovered an interest in artificial disc replacement research as well as surgery.

Today, when he's not working hard to learn more about artificial discs, or spending time with his wife Carlin, an emergency room nurse practitioner, or son Maxwell, 4, he's helping out as an honorary police surgeon.

"They still send officers over to me if they need a second opinion, or if they can't find a clear answer for a spinal problem," Dr. Murray said. "I'm learning —moving forward, but I don't forget where I came from." ♦

MILESTONES

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Matthew A. Bank, M.D. '95, is acting chief for the trauma division, co-director of the surgical intensive care unit, and program director for the surgical critical care fellowship at North Shore University Hospital in Manhasset, N.Y. Dr. Bank completed his surgical residency training at the Long Island Jewish Medical Center in New Hyde Park, N.Y., following a fellowship in trauma and critical care at the Yale University School of Medicine.

James Bartley, M.D. '95, is the senior physician services manager with Relay Health Corp. in New York, a provider of payer-reimbursed secure online healthcare communications services linking patients, healthcare professionals, health plans and pharmacies. Previously, Dr. Bartley was the manager of Medicare network relations for Wellcare of New York.

Bradley S. Cash, M.D. '95, is the director of Spine Options, a center specializing in non-surgical care of the neck and back, located in White Plains, N.Y.

Lawrence J. Fliegelman, M.D. '95, has opened a medical day spa called Turquoise: A Medical Day Spa, in Fairfield, Conn. The spa offers traditional services and medical aesthetic procedures such as filler injections and laser treatments. Dr. Fliegelman is certified by the American Board of Facial Plastic and Reconstructive Surgery.

Barry S. Goldberg, M.D. '95, formerly assistant professor in the Department of Radiology and director of the Division of Musculoskeletal Radiology at New York Medical College, is on staff at Saratoga Hospital in Saratoga Springs, N.Y. Dr. Goldberg is also in practice with Millennium Medical Imaging.

Susan M. Parisi, M.D. '95, is practicing obstetrics and gynecology in Sharon, Conn., where she is also on staff at Sharon Hospital. Most recently, Dr. Parisi was in private practice in Middletown, N.Y.

Manoj Aswani, M.D. '94, is a partner and former CEO of Arroyo Oaks Medical Associates in Thousand Oaks, Calif. Dr. Aswani is married, with one daughter, age 7.

James L. Januzzi, Jr., M.D. '94, is the team cardiologist to the Boston Red Sox. Dr. Januzzi is working at Massachusetts General Hospital in Boston, has a clinical practice and is also performing clinical trials. He and his wife Roberta, who recently celebrated 11 years of marriage, live in Chestnut Hill with their daughters Caterina, 8, and Julianne, 5.

David Marshall Kulick, M.D. '93, a thoracic and cardiovascular surgeon, is in private practice with Capital Cardiothoracic Surgeons in Austin, Texas.

Felix E. (Gene) Shepard, Jr., M.D. '93, is in solo urology practice in Norton, Va. Dr. Shepard is married to Karla and is the father of two girls, 11-year-old Susanna and 6-year-old Gillian.

Kevin Holcomb, M.D. '92, is director of gynecologic oncology at Beth Israel Medical Center in New York City, and assistant clinical professor of obstetrics and gynecology at the Columbia University College of Physicians and Surgeons. Dr. Holcomb researches the management of cervical cancer and the treatment of cervical pre-cancer in HIV-positive women. A member of the Harlem Cancer Control Coalition, he is also studying the racial healthcare disparities in the New York area and promoting increased cancer screening for early detection. Dr. Holcomb is on the board of directors of the American Cancer Society and the executive council of the Metropolitan Gynecologic Cancer Society.

Thomas Hunt, M.D. '92, is chairman and program director of family and community medicine at the University of Nevada School of Medicine in Las Vegas and directs the family medicine residency program. He was also the Nevada Academy of Family Physicians 2005 Family Physician of the Year.

Victor J. Weiss, M.D. '92, is the proud father of Alexander Joseph Weiss, born July 25, 2005, the "greatest baby of all time!"

Elisabeth McKeon, M.D. '91, is on the staff of Catskill Family Care in Catskill, N.Y.

Roy Stern, M.D. '91, "finally" got married to Christina, has opened his own office in New York City, and is still teaching at New York University every week.

Roman Bilynsky, M.D. '90, is deputy commander for clinical services at Patterson Army Health Clinic at Fort Monmouth, N.J. While working mainly in healthcare leadership, Dr. Bilynsky is also running a child neurology and pediatric clinic. He officiated at the swearing in of new graduates entering the armed forces at the College's 2006 Commencement exercises.

Joanne P. Starr, M.D. '90, is director of pediatric cardiac surgery for the Children's Heart Center at Beth Israel Medical Center in Newark, N.J.

The Eighties

Theresa L. Christie, M.D. '89, completed Chief of Staff year (2004-05) at St. Joseph's Hospital in Augusta, Ga. Dr. Christie is a practicing ob/gyn at the Summerville Women's Medical Group in Augusta, Ga.

Jeffrey P. Cohen, M.D. '89, is still at the Fallon Clinic in Worcester, Mass.

Gregory C. Malloy, M.D. '89, is a consulting physiatrist for Westborough Health Care Center in Westborough, Mass.

Victor S. Sloan, M.D. '89, recently traveled to China with his wife, Sandra Gong, and daughter Mei-lin, to adopt their second daughter, An-lin. "An-lin is wonderful, but whoever said 1+1 = 11 was telling the truth!"

David A. Staffenberg, M.D. '89, is chief of pediatric plastic surgery and the surgical director for the Center for Craniofacial Disorders at Montefiore Hospital in New York. Dr. Staffenberg is also assistant professor of plastic and reconstructive surgery and of pediatrics at the Albert Einstein College of Medicine.

Richard D. Schultz, M.D. '88, is practicing in a cardiology group practice in Hickory, N.C. Dr. Schultz, his wife, Linda, and their children, Lauren, Madison and Andrew, enjoy living in the Piedmont area of North Carolina. "We are eager to entice any interested physicians to look into this family-centered community."

M. Denton Stam, M.D. '88, is managing partner of a private practice group, Winchester Cardiothoracic and Vascular Surgeons, in Winchester, Va.

Kay Cowan, M.D. '87, sends "Many warm wishes to my fellow graduates. All is well in Westport, Conn. I hope the same is true for you."

James E. Cremins, M.D. '87, has been "alive and well" in Hagerstown, Md., for the past 10 years, nine of which he has spent on active duty with the U.S. Army. Dr. Cremins has been married to Karen for 14 years. The couple has three children: Sean, 12, Caitlin, 9, and Thomas, 7. Dr. Cremins is looking forward to the 20th reunion in 2007.

Karen Hathaway, M.D. '87, is on staff at The Pediatric Group in Troy, Ohio.

Fiona Howard Levy, M.D. '87, is vice president of quality, as well as an attending physician in the pediatric intensive care unit for the Children's Medical Center in Dallas, Texas. Dr. Levy is also associate professor of pediatrics at the University of Texas Southwestern Medical Center.

Michelle A. (Grosz) Multz, M.D. '87, says daughter Rachel, almost 11, and son Daniel, 5, are "growing up a little too fast!"

Tyrone J. Krause, M.D. '85, is associate director of cardiothoracic surgery at Saint Michael's Medical Center, an affiliate of Cathedral Healthcare System, serving residents in Newark, N.J., as well as the Oranges, Kearny, Harrison, Union, Elizabeth and Nutley.

Andrew K. Sands, M.D. '85, is chief of foot and ankle surgery at Saint Vincent Catholic Medical Centers in New York. He is also treasurer of the American Orthopaedic Foot and Ankle Society.

Duane Austin, M.D. '84, is in private practice in Ophthalmology in West Hartford, Conn.

Mark Brandon, M.D. '84, and wife Debby are big sports fans (they love the Mets, Knicks and Rangers), with two children, Madison, 19 and in college, and Dustin, 16, and two dogs.

Stephen F. Carolan, M.D. '84, is director of obstetrics and gynecology at Greenwich Hospital in Greenwich, Conn.

Joseph Cervia, M.D. '84, is professor of clinical medicine and pediatrics at Albert Einstein College of Medicine.

Russell Settipane, M.D. '84, an allergy/immunologist, is collaborating with **David Charnock, M.D. '84,** an otolaryngologist, in writing a textbook chapter on rhinitis.

Betty Catanese, M.D. '83, a board certified internist, is in a private general medicine practice in Somerville, N.J.

Joan Liman, M.D. '83, M.P.H. '93, was selected to serve as an Eastern Division 2006-07 Celebration Ambassador for the American Cancer Society. "As a two-time cancer survivor, I owe my life to the research that produced drugs such as Arimidex and Zofran!"

Thomas J. Magrino, M.D. '83, is retired from the U.S. Navy and joined Woodland Healthcare in Woodland, Calif. He is also chief of surgery at Woodland Hospital.

Malcolm Z. Roth, M.D. '82, is director of the division of plastic surgery at Maimonides Medical Center in Brooklyn, N.Y. and has recently been elected to the board of directors of the American Society of Plastic Surgeons.

Nicholas E. DeRobertis, M.D. '81, has been appointed medical director of Saint Joseph's Medical Center in Yonkers, N.Y.

Sam F. Frankel, M.D. '81, writes that he and wife Clair had a great time at the 25th reunion. "I would love to hear from my old friends who couldn't make it, preferably before the 50th reunion! SFFrankel@aol.com.

Alexander Peralta Jr., M.D. '81, is medical director of palliative care and education at Universal Health Services in Fort Worth, Texas. Dr. Peralta is recognized for his work in hospice, pain management, and palliative care, medical ethics, regulatory and compliance issues, institutional diversity, and cultural competency. Dr. Peralta is a diplomate of the American Board of Hospice and Palliative Medicine and was an early board member for the Texas Partnership for End-of-Life Care.

Philip A. Butler, M.D. '80, who is practicing in La Jolla, Calif., writes, "Teresa and I had a great time at the 25th reunion. It was great to see everyone back in New York again."

Paul R. Eisenberg, M.D. '80, is working as vice-president of global safety for Amgen.

Lidia Pousada, M.D. '80, is Medicaid director of Hudson Valley Geriatrics and Internal Medicine in Briarcliff, N.Y

The Seventies

Robert Barish, M.D. '79, received a meritorious service medal from the state of Maryland for service as chief medical officer for Operation Life Line, in response to Hurricane Katrina. Dr. Barish is a colonel in the Maryland Defense Forces and commander of the 10th Medical Regiment.

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MILESTONES

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Jennifer Rosenthal Thulin, M.D. '79, is in private practice in ob-gyn in the Boston suburbs and would love to hear from any classmates traveling to the Boston area.

Jack DiPalma, M.D. '78, was recently elected president of the American College of Gastroenterology.

William A. McGann, M.D. '77, is director of the orthopaedic residency program at St. Mary's Hospital in San Francisco. Dr. McGann is also chief of orthopedics at the hospital, specializing in total joint reconstruction.

Enrique A. Silberblatt, M.D. '77, is practicing plastic surgery at Aesthetic Surgery of Virginia in Roanoke.

Brian Altman, M.D. '76, is an orthopaedic surgeon at Lock Haven Hospital in Lock Haven, Pa.

Paul L. Novotny, M.D. '76, is chairman of the department of radiology at Mount Vernon Hospital in Mount Vernon, N.Y.

Bernard Powers, M.D. '76, is glad to be back in Colorado after a two-year "pleasant sojourn" in Pennsylvania.

Vincent Vigorita, M.D. '76, is chairman of the board at the Poly Prep Country Day School in Brooklyn and a member of the Amagansett School Board in the town of East Hampton. "Regards to all."

Edward Jacobson, M.D. '75, a gynecologist, is an attending physician at Greenwich Hospital and the Fairfield County Surgery Center. Dr. Jacobson also directs the Laser Vaginal Rejuvenation Center of Greenwich.

Fern L. Perlman, M.D. '75, is a pediatrician with the Norwalk Medical Group in Westport, Conn. Dr. Perlman's daughter Meredith was married last year to Mark Hawkins in Los Cabos San Lucas, Mexico.

L. Scott Herman, M.D. '74, is the co-founder of Cardiovascular Consultants of San Gabriel Valley in Arcadia, Calif. Dr. Herman is also chief of cardiology at Huntington Memorial Hospital and the San Gabriel Valley Medical Center.

Charles R. Reina, M.D. '74, announces that son Christopher, 27, works for the U.S. Defense Department in Philadelphia, while daughter Patricia, 24, is a certified elementary school counselor working in the Phillipsburg, N.J. school district. "Mom and Dad are resting."

Victor La Cerva, M.D. '73, retired from the New Mexico Department of Health, will continue to pursue his speaking and writing career, as well as his interests in music and Aikido.

Ken Mitchell, M.D. '73, has left South Florida after 26 years of private practice to accept a teaching position at the University of South Carolina in Columbia. He is in charge of the glaucoma service and is involved in patient care and research.

Shera Aranoff Tuchman, M.D. '73, announces that daughter Nicole Bina Tuchman received her medical degree from New York Medical College on May 21, 2005.

Barry Reisberg, M.D. '72, is largely responsible for the approval of half of the presently FDA-approved and utilized medications for the treatment of Alzheimer's disease.

Harvey Aiges, M.D. '71, is chairman of pediatrics at Nassau University Medical Center in East Meadow, N.Y.

Mai-Lan Rogoff, M.D. '71, is associate dean for student affairs at the University of Massachusetts Medical School in Worcester, Mass.

Jill S. Hirsch, M.D. '70, writes that twin daughters Allison and Jessica are seniors at Columbia University in New York. Younger daughter Larissa is a freshman at Drew University in Madison, N.J. "Randy and I are working hard to pay for their education. We enjoyed seeing our classmates at the 25th reunion."

C.B. Mosher, M.D. '70, M.P.H., is the author of non-fiction books, including *Emergency First Aid*, sold nationwide by the Consumer Guide Corporation, several scientific medical articles and many short stories, as well as a work of historical fiction, *A Greater Pox*.

The Sixties

Judith Friedman Kupersmith, M.D. '69, is a professor of clinical psychiatry at Georgetown University Hospital and Medical Center in Washington, D.C.

Robert Orlandi, M.D. '68, is practicing orthopaedics in Connecticut and is the father of three children, including a recent Harvard law graduate.

Stephanie Roze, M.D. '68, is practicing pediatrics with the New York City Health and Hospitals Corporation.

Randolph D. Maloney, M.D. '67, is practicing vascular surgery ("with no night call") in Beverly, Mass. "Mary Alice and I are enjoying the extra time. All three daughters now live back in Massachusetts. Hello to all."

Stephan Greenberg, M.D. '66, a captain in the U.S. Navy Reserve, retired after 20 years of service but continues to practice ophthalmology in Hornell, N.Y.

Tony Cohen, M.D. '66, is retired, living in Ridgefield, Conn., and spending his time skiing, diving and occasionally consulting.

Steven Weissberg, M.D. '66, has cut back on practice to enjoy his grandchildren and would love to hear from fellow classmates.

Morton Meltzer, M.D. '65, is a psychiatrist in Cameron, N.C.

Joel Kupersmith, M.D. '64, is the chief research and development officer for the Department of Veterans Affairs in Washington, D.C.

Ira Raff, M.D. '64, is practicing in Danbury, Conn., and looking for a urologist to take over his solo practice. Dr. Raff's son Jason is executive producer of the television show "Three Wishes" and his daughter is a social worker in Massachusetts.

Gabriel G. Curtis, M.D. '62, is retired after 38 years of practicing anesthesiology at New York Hospital.

Elizabeth Moffett Craven, M.D. '61 and **Walis Craven, M.D. '63,** are the proud grandparents of Alexander Wales Craven, who joins sister Julia, age 3. "We are happily retired in Melbourne, Fla., and are students of golf."

Howard Harrison, M.D. '61, is working with the governing council of the senior physicians group for the American Medical Association in Cape Coral, Fla.

Don V. Hillerman, M.D. '61, is the proud grandfather of three: twins, Julianna Joy and Klee Fulvia, and Alissa Jeanne.

Robert D. Hirsch, M.D. '61, is practicing office gynecology part time in Teaneck, N.J., while spending winters in Sarasota, Fla.

Fred L. Humeston, M.D. '61, is in a private pediatric practice in the San Francisco Bay Area, with no retirement in sight. Dr. Humeston has seven grandchildren, ages 3 to 15 years.

The Fifties

Andrew J. Dadagian, M.D. '59, an otolaryngologist, is semi-retired, with five married children, 10 grandchildren, and has been married for 47 "blissful" years to **Barbara Dadagian, M.S. '58**.

Benjamin Sadock, M.D. '59, has published the eighth edition of the *Comprehensive Textbook of Psychiatry*, co-edited with his wife, **Virginia Sadock, M.D. '70**.

Raymond Bagg, M.D. '58, is working in the department of orthopaedic surgery and rehabilitation at Texas Tech HSC in El Paso.

Robert J. Blankfein, M.D. '58, and wife Leslie spent a very pleasant evening over dinner with **Howard Kline, M.D. '58,** and wife Ellen and **Jim Justice, M.D. '58,** and wife Angela in San Francisco on April 19, 2006. Bob and Jim are retired, but Howard is still engaged in an active cardiology practice in San Francisco and enjoys it very much.

Margaret McGall Boyes, M.D. '58, is retired from the practice of psychiatry and living in Naples, Fla., after living for the past 17 years in Mexico.

James Justice, M.D. '58, is retired, has become a painter and resides in Maine during the summer.

Howard Kline, M.D. '58, is practicing cardiology, teaching and lecturing in San Francisco; swimming competitively for the University of San Francisco masters swim team; and qualified for the world final swimming championship at Stanford University.

Richard Perera, M.D. '58, is on staff at the Berkshire Medical Center and is an internal medicine practitioner with the Berkshire Medical Group in Pittsfield, Mass. Dr. Perera is also an assistant professor in the department of medicine at the University of Massachusetts Medical School.

John Sadowski, M.D. '58, is retired from his position as vice president of medical affairs at Good Samaritan Hospital in Suffern, N.Y.

James H. Armstrong, M.D. '57, on his way to complete retirement, reports that his son took over his family practice in 2000. "My new interest is Shamanism."

Albert L. Huber, M.D. '57, is practicing allergy three days a week in Charlottesville, Va. The rest of the time, 51 acres and a garden keep him busy.

Joseph Intile, M.D. '57, is thoroughly enjoying retirement and world travel, primarily to Southeast Asia, as well as living in Eastern Oregon among the ranchers and foresters.

Thomas F. Mathews, M.D. '57, is teaching part time at the University of California, San Francisco.

Martin H. Floch, M.D. '56, is the founding chief of gastroenterology and nutrition at Norwalk Hospital and editor of *The Journal of Clinical Gastroenterology*. Dr. Floch edited Netter's *Gastroenterology*, a reference for healthcare practitioners, a comprehensive textbook covering major gastrointestinal diseases and conditions, including etiology, clinical presentation, differential diagnosis, management and therapy. Dr. Floch has a private medical practice in the Norwalk Hospital Medical Office Building in Norwalk, Conn. His practice includes gastroenterology, nutrition, endoscopy and hepatology. He is also a clinical professor of medicine at Yale University School of Medicine.

James B. Leach, M.D. '56, is retired and living in East Greenwich, R.I.

Edwin J. Madden, M.D. '56, retired from orthopaedic surgery in 2000 and owns and runs the Stella Maris Inn in Newport, R.I. with wife Dorothy.

Clinton Lawrence, M.D. '55, who is retired, received his gold diploma on May 21, 2005.

Peter M. Masley, M.D. '55, who is retired, received his 50-year gold diploma on May 21, 2005.

The Forties

Felix Wimpfheimer, M.D. '45, is still practicing medicine in Bronx, N.Y. and he and his wife Annette Newman Gordon celebrated 65 years of marriage on June 29, 2006, in Aptos, Calif. Present were daughters Elizabeth and Margaret, along with their husbands, son Jim and his wife; grandchildren Devon, Grace and Matt. Another grandson, Holter Graham, made a special tribute to his grandparents for the occasion.

Humanity in medicine is all in the Mignone family

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asthma, and lots of chronic illnesses and nutritional concerns," said Mrs. Mignone. "One of the most important roles that our nurses play in the schools is being the person a child can talk to about problems when he or she is having a difficult time."

Before she started working in the Greenwich schools four years ago, Kathleen educated parents about diabetes for the Westchester County Head Start Program. Then she worked with Richard Noto, M.D., assistant professor of pediatrics at the College and a specialist in pediatric endocrinology. She said her various experiences have allowed her to see the health issues of children from different perspectives.

"New York Medical College has provided me with a very sound clinical education in nursing on the graduate level, which has allowed me to have a varied and interesting career in nursing while still being available for my family," Mrs. Mignone said. "I'm glad I chose nursing, because it is truly a gift to be able to experience the human interaction that occurs while helping a patient."

Paul Mignone, M.D. '06

Paul sees his future as "a more socially aware physician." Two days before graduation, Paul had returned from a 50-day, 3,700-mile bike ride across the United States. The purpose of the cross-country trek was to raise $200,000 for Partners in Health (PIH), an organization that raises awareness of important healthcare issues, such as HIV/AIDS, universal health care and infant mortality among the world's poor and offers ideas and resources on what others can do to help.

It was a trip to the Dominican Republic with his father on a mission of compassionate care that led Paul to choose ophthalmology as his specialty. Working in the operating rooms with other physicians and treating patients who might not have perceived cataract surgery without the generosity of U.S. ophthalmologists, Paul discovered a real purpose and meaning in his life's calling.

"I want to be part of whatever community I practice in," said Dr. Mignone. "I'm so inspired by physicians who see their patients as whole people, not just as ailments, and seek to better their lives. I want to realize my responsibility as a patient advocate and not be so buried in practice and paperwork that I can't see the humanity." ♦

Michael Arduino, M.S. '81

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involving heparin flush. The team is also developing optimum methods to detect and decontaminate surfaces and water that may be contaminated with Category A and B bacterial agents in the event of a bioterrorism attack. Dr. Arduino's efforts have been acclaimed with many service citations, including the 2002 Health and Human Services Secretary's Award for Distinguished Service for his work related to investigations at ground zero following the September 11, 2001, attacks, and the Anthrax Investigation Emergency Response Team.

"We really run the gamut in our laboratory," he said. ♦

In Memoriam

Michael DeMarco, M.D. '35, died April 10, 2003. He was 93.

Henry Buermann, M.D. '37, died November 29, 2004. He was 93.

Eric G. Norrington, M.D. '38, died November 15, 2005.

Stephen J. Grey, M.D. '43, died August 23, 2005. He was 89.

Sheldon H. Kaften, M.D. '43, died February 1, 2003.

Raymond P. Reilly, M.D. '43, died March 2, 2005. He was 85.

Gregory A. Solanto, M.D. '43, died February 1, 2006. He was 91.

Ethel M. Naughton, M.D. '44, died August 25, 1998.

Wallace J. Paulson, M.D. '45, died May 21, 2000.

Arthur W. Adams, M.D. '47, died January 8, 2000.

Charles Socarides, M.D. '47, died December 25, 2005. He was 83.

Robert K. Egge, M.D. '48, died September 23, 2004.

Murray Herman, M.D. '49, died August 20, 2004. He was 82.

Gertrude V. Erickson, M.D. '51, died December 23, 2004.

John Francis Burns, M.D. '54, died April 25, 2005.

Edward F. Knauff, M.D. '54, died March 6, 2005.

Helen M. Trauerts Petrulio, M.D. '55, died July 28, 2005.

Francis "Frank" M. Hall, M.D. '56, died June 8, 2005.

Morton Birnbaum, M.D. '57, died November 26, 2005. He was 79.

Lawrence A. Chusid, M.D. '57, died July 1, 2001.

Samuel Clark, Jr., M.D. '57, died October 2, 2005. He was 78.

Richard O. Sword, M.D. '57, died December 23, 2005. He was 81.

Howard B. Weitzner, M.D. '59, died April 24, 2006.

Fred J. Epstein, M.D. '63, died July 9, 2006. He was 68.

John M. Nicoletti, M.D. '63, died June 14, 2005.

James A. Umhey, M.D. '67, died February 14, 2006. He was 65.

Robert Michael Merrick, D.D.S., M.D. '69, died June 22, 2005. He was 68.

Terence Matthews, M.D. '71, died January 11, 2005.

Robert J. Porto, M.D. '76, died March 14, 2006. He was 54.

Faculty

Seymour L. Halpern, M.C., assistant clinical professor of medicine from 1954 to 1988, died June 7, 2006, at the age of 83.

William Levin, M.D., associate professor of clinical emergency medicine and member of the Department of Emergency Medicine at Metropolitan Hospital Center in New York, died September 21, 2005.

James F.X. O'Rourke, M.D., professor of clinical ophthalmology and vice chairman of the Department of Ophthalmology, died on August 4, 2006 at the age of 86.

Johannes A.G. Rhodin, M.D., Ph.D., former professor and chair of the Department of Anatomy, and most recently a professor at the University of South Florida, credited with conducting breakthrough research on Alzheimer's disease, died December 10, 2004. He was 82.

Edward Wasserman, M.D. '46, was professor and Chairman of the Department of Pediatrics from 1966 until his retirement in 1991. He received the Alumni Distinguished Service Medal in 1988. He died April 20, 2006 at the age of 85.

Calendar of Events

January 28, 2007
24th Annual Alumni CME Conference
"Current Concepts and Controversies in Medicine and Surgery"
Embassy Suites, Dorado Del Mar Beach and Golf Resort
Dorado, Puerto Rico

May 19, 2007
Annual Alumni Banquet and Awards Presentation

May 20, 2007
Five-Year Class Reunions Luncheon

May 24, 2007
148th Commencement

For additional information,
please call the Alumni Office at (914) 594-4556.

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